****
*** REQUESTOR: JM05616 - MOSSBARGER, J.W. DARRINGTON UNIT ***
****
*** S Y S M I N B A S K E T P R I N T ***

MESSAGE ID: 099751T DATE: 07/16/04 TIME: 02:32pm PRIORITY: 000

TO: JM05616 - MOSSBARGER, J.W.
ASSISTANT WARDEN
DARRINGTON UNIT
59 DARRINGTON ROAD
ROSHARON, TEXAS 77583

FROM: TF01382 - FOREMAN, TREASURE
WARDEN'S SECRETARY
DARRINGTON UNIT
59 DARRINGTON ROAD
ROSHARON, TEXAS 77583

SUBJECT: ROBERTSON,RICKY #1172218

Warden Weston
I left Another message on
Mrs. Green's Phone.
Thx

*** Original Author: JG09667 - GOMEZ, JAVIER; 07/16/04 02:28pm

THE ABOVE REFERENCED OFFENDER WAS PLACED ON THE CRITICAL LIST ON 7/16/04 AT 0420 HRS BY DR. MOVVA DX:OVERDOSE THE NOK WAS CONTACTED AT 1350 HRS AS LISTED BELOW.

ROBERTSON,ROY/BRO
21 N. LINCOLN AVE.
NILES,MI 49120
269-683-2393

AUTH: S. WARDEN K. NEGBENEBOR, TDCJ HG
CHAPLAIN GOMEZ/LW

*** Comments From: TF01382 - FOREMAN, TREASURE; 07/16/04 02:32pm

Sent to:			
	JM05616	MOSSBARGER, J.W.	(to)
	HWE4474	WESTON, HERMAN	(to)
	FR00763	RODRIGUEZ, FRANK III	(to)
	DACLS16	O'GUIN, JANICE	(to)

CORRECTIONAL MANAGED CARE
CLINIC NOTES - MID LEVEL PROVIDER

Patient Name: ROBERTSON, RICKY L **TDCJ#:** 1172218 **Date:** 04/05/2004 13:15
Facility: LOPEZ

CASE SUMMARY
Problems:
CONSTIPATION [564.0] first observed 12/23/2003 (Active)
HEADACHE [784.0] first observed 12/23/2003 (Active)
PHYSICAL EXAMINATION [V70.7] first observed 09/09/2003 (Active)
TB CLASS 0 (NO EXPOSURE PULM. TUBERCULOSIS) [011.] first observed 06/26/2003 (Active)

Medications:
Allergies: NO KNOWN ALLERGIES
Current Lab Tests:
Most recent vitals from 04/05/2004: BP: 124 / 73 (Sitting) Wt. 235 Lbs. Height Pulse: 63 (Sitting) Resp.: 18 / min Temp: 96.8 (Oral)

Interpreter Used		Yes	X	No	Name of interpreter:

Chief Complaint: FOR THE LAST 4 MONTHS BUT WORSE IN THE LAST MONTH; PT CLAIMS HE GETS SOME PAROXISMAL ANXIETY EPISODES WHERE HE FEELS HE HAS TO GET UP OR STOP WHAT HE IS DOING AND START DOING SOMETHING ELSE TO CALM HIMSELF DOWN;
DENIES ANY PANIC EPISODES
CLAIMS H/O BIPOLAR DISORDER YRS AGO BUT HAS NOT TAKEN MEDS FOR OVER 5 YRS
DENIES ANY THOUGHTS OF SELF HARM OR HARM TO OTHERS
O=
GOOD MOOD-AFFECT-COGNITION
NL SPEECH-SENSORIUM
GOOD RECALL-ORIENTATION-CALCULATION
A=
ANXIETY(NONSPECIFIC ETIOLOGY)
Plan is as follows:
REASSURANCE
III-12,25 X -90 DAYS
REFER TO MENTAL HEALTH
F/U 14 DAYS

Electronically Signed by GONZALEZ, MIGUEL PA on 04/05/2004.
Electronically Signed by MERCADO, STEVEN A M.D.
on 04/05/2004.
##And No Others##

CORRECTIONAL MANAGED CARE
CLINIC NOTES - MID LEVEL PROVIDER

Patient Name: ROBERTSON, RICKY L **TDCJ#:** 1172218 **Date:** 04/20/2004 10:54
Facility: LOPEZ

[redacted]SE SUMMARY
Problems:
BIPOLAR I DISORDER NOS [296.80] first observed 04/16/2004 (Active)
CONSTIPATION [564.0] first observed 12/23/2003 (Active)
HEADACHE [784.0] first observed 12/23/2003 (Active)
PHYSICAL EXAMINATION [V70.7] first observed 09/09/2003 (Active)
TB CLASS 0 (NO EXPOSURE PULM. TUBERCULOSIS) [011.] first observed 06/26/2003 (Active)

Medications:
LITHIUM CARBONATE 300MG CAPS, 3 CAPS ORAL(po) BID
Special Instructions: EQUI=ESKALITH.

Allergies: NO KNOWN ALLERGIES
Current Lab Tests:
Most recent vitals from 04/20/2004: BP: 142 / 78 (Sitting) Wt. 230 Lbs. Height Pulse: 64 (Sitting) Resp.: 18 / min
Temp: 97.9 (Oral)

Interpreter Used		Yes	X	No	Name of interpreter:

Chief Complaint: F/U ANXIETY ; CLAIMS HE FEELS MUCH BETTER TODAY ON MEDICATION AS PRESCRIBED BY MENTAL HEALTH
O=
[redacted]YSICAL EXAMINATION= UNREMARKABLE
A=
F/U ANXIETY(UNDER CONTROL)
H/O HA
Plan is as follows:
REASSURANCE

Started Meds:
IBUPROFEN 400MG TABS 53746013101 04/20/2004 11:11
1 TABS ORAL(po) B BID
Special Instructions:Equi=Motrin.
Kop X 14d
STOP DATE: 05/04/2004 11:11 REFILLS:
F/U PRN

[redacted] Electronically Signed by GONZALEZ, MIGUEL PA on 04/20/2004.
##And No Others##

CORRECTIONAL MANAGED CARE
CLINIC NOTES - MID LEVEL PROVIDER

Patient Name: ROBERTSON, RICKY L **TDCJ#:** 1172218 **Date:** 05/19/2004 12:07
Facility: LOPEZ

[redacted]SE SUMMARY
Problems:
ALLERGIES [477.9] first observed 05/17/2004 (Active)
BIPOLAR I DISORDER NOS [296.80] first observed 04/16/2004 (Active)
CONSTIPATION [564.0] first observed 12/23/2003 (Active)
DISORDERS OF EAR NOS [388] first observed 05/17/2004 (Active)
HEADACHE [784.0] first observed 12/23/2003 (Active)
OBSERVATION- COND NOT FOUND [V71] first observed 05/07/2004 (Active)
PHYSICAL EXAMINATION [V70.7] first observed 09/09/2003 (Active)
TB CLASS 0 (NO EXPOSURE PULM. TUBERCULOSIS) [011.] first observed 06/26/2003 (Active)

Medications:
LITHIUM CARBONATE 300MG CAPS, 3 CAPS ORAL(po) BID
Special Instructions: EQUI=ESKALITH.
PSEUDO TABS 30MG TABS, 1 TABS ORAL(po) BID
Special Instructions: EQUI=PSEUDOEPHEDRINE, SUDAFED. KOP X 7D

Allergies: NO KNOWN ALLERGIES
Current Lab Tests:
Most recent vitals from 05/19/2004: BP: 144 / 77 (Sitting) Wt. 232 Lbs. Height Pulse: 77 (Sitting) Resp.: 12 / min
Temp: 98.6 (Oral)

[redacted]me of interpreter, if required:

Chief Complaint: moderate difficulty with bm 's for the last wek; last bm = 2 days ago with some difficulty
no other gi disturbance
0=
abd- unremarkable
a=
mild constipation

Plan is as follows:
elf modify diet as explained

Started Meds:
METAMUCIL PACKETS 37000074087 05/19/2004 12:20
1 PACKETS ORAL(po) QD
Special Instructions:Equi=Psyllium, Konsyl.
Kop X 14d
STOP DATE: 06/02/2004 12:20 REFILLS:

u prn
[redacted]

CORRECTIONAL MANAGED CARE
CLINIC NOTES - MID LEVEL PROVIDER

Patient Name: ROBERTSON, RICKY L **TDCJ#:** 1172218 **Date:** 05/19/2004 12:07
Facility: LOPEZ

Electronically Signed by GONZALEZ, MIGUEL PA on 05/19/2004.
##And No Others##

CORRECTIONAL MANAGED CARE
CLINIC NOTES - MID LEVEL PROVIDER

Patient Name: ROBERTSON, RICKY L **TDCJ#:** 1172218 **Date:** 06/08/2004 14:41
Facility: LOPEZ

CASE SUMMARY
Problems:
ALLERGIES [477.9] first observed 05/17/2004 (Active)
BIPOLAR I DISORDER NOS [296.80] first observed 04/16/2004 (Active)
CONSTIPATION [564.0] first observed 12/23/2003 (Active)
DISORDERS OF EAR NOS [388] first observed 05/17/2004 (Active)
HEADACHE [784.0] first observed 12/23/2003 (Active)
OBSERVATION- COND NOT FOUND [V71] first observed 05/07/2004 (Active)
PHYSICAL EXAMINATION [V70.7] first observed 09/09/2003 (Active)
TB CLASS 0 (NO EXPOSURE PULM. TUBERCULOSIS) [011.] first observed 06/26/2003 (Active)

Medications:
CHLORPROMAZINE HCL 50MG TABS, 2 TABS ORAL(po) BID
Special Instructions: EQUI=THORAZINE. *NON-KOP*, MAY CAUSE DROWSINESS OR DIZZINESS, MAY IMPAIR THE ABILITY TO DRIVE OR OPERATE MACHINERY, THIS STRENGTH RESTRICED FROM UNIT STOCK, VERY IMPORTANT TO TAKE OR USE THIS EXACTLY AS DIRECTED
LITHIUM CARBONATE 300MG CAPS, 3 CAPS ORAL(po) BID
Special Instructions: EQUI=ESKALITH.

Allergies: NO KNOWN ALLERGIES
Current Lab Tests:
Most recent vitals from 06/08/2004: BP: 130 / 80 (Sitting) Wt. 227 Lbs. Height Pulse: 85 (Sitting) Resp.: 16 / min Temp: 98.2 (Oral)

Name of interpreter, if required:

Chief Complaint: C/O POSTURAL OCCASIONAL DIZZINESS AND IS AFRAID HE MIGHT FALL OFF BED
)=
/E- UNREMARKABLE
-
H/O SUBJ DIZZINESS

Plan is as follows:
B2- 90D
/U PRN

Electronically Signed by GONZALEZ, MIGUEL PA on 06/08/2004.
##And No Others##

CORRECTIONAL MANAGED CARE
CLINIC NOTES - NURSING

Patient Name: ROBERTSON, RICKY L **TDCJ#:** 1172218 **Date:** 05/05/2004 20:30
Facility: LOPEZ
Most recent vitals from 05/05/2004: BP: 125 / 75 (Sitting) Wt. Height Pulse: 68 (Sitting) Resp.: 20 / min Temp: .9 (Oral)
Current Medications:
LITHIUM CARBONATE 300MG CAPS, 3 CAPS ORAL(po) BID
Special Instructions: EQUI=ESKALITH.

Current Lab Tests:
Allergies: NO KNOWN ALLERGIES
Today's Problem:S) PT STATES HE IS HAVING DIFFICULTY BREATHING, STATES HAS HAD THIS PROBLEN BEFORE.
O) PT. WALKED IN ALERT AND ORIENTED, C/O DIFFICULTY BREATHING, SHIN WARM AND DRY COLOR APPROP. V/S 97.9 -68 -20 BP 125/75. LUNGS CLEAR ON AUSCULTATION, O2 SAT. 98%. PT. STATES HE HAS ALREADY BEEN SEEN FOR THIS PROBLEM. PT. APPEARS NERVOUS, DENIES ANY PAIN OR ANY OTHER DISCOMFORT.
A) ALTERATION IN COMFORT DUE TO DIFF. BREATHING.

Name of interpreter, if required:

Procedures Ordered:
NURSING LEVEL1 COMPLETE VISIT: bipolar i disorder nos
NURSING PATIENT EDUCATION: bipolar i disorder nos

Plan is as follows: INSTRUCTED TO RELAX,CONTINUE WITH HIS MEDS AND TO SUBMIT SCR TO BE SEEN BY PA.

Electronically Signed by MCCLELLAN, BERNAIDA P L.V.N. on 05/05/2004.
Electronically Signed by GONZALEZ, MIGUEL PA on 05/06/2004.
##And No Others##

CORRECTIONAL MANAGED CARE
CLINIC NOTES - NURSING

Patient Name: ROBERTSON, RICKY L **TDCJ#:** 1172218 **Date:** 05/13/2004 19:43
Facility: LOPEZ
Most recent vitals from 05/13/2004: BP: 135 / 83 (Sitting) Wt. Height Pulse: 78 (Sitting) Resp.: 20 / min Temp: [redacted].8 (Oral)
Current Medications:
LITHIUM CARBONATE 300MG CAPS, 3 CAPS ORAL(po) BID
Special Instructions: EQUI=ESKALITH.

Current Lab Tests:
Allergies: NO KNOWN ALLERGIES
Today's Problem: WALK-IN C/O SOB. STATES TOO HOT IN DORM. PATIENT SITTING IN MEDICALL FOR APPROX 15MIN. NO RESP DISTRESS NOTED AT THIS TIME. STATES HE MIGHT HAVE AN APPT. WITH MS. DENNISON TOMORROW. STATES FEELING BETTER AFTER SITTING IN COOL AREA. (O) NO RESP DISTRESS NOTED. LUNGS BILATERALLY CLEAR.

Name of interpreter, if required:

INST PATIENT TO TRY TO STAY OUT OF VERY HOT AREAS AND TO TRY AND RELAX
Plan is as follows: E-MAIL MS DENNISON REGARDING : PATIENT INFORMED THAT HE HAS APPT THIS WEEK.

Procedures Ordered:
NURSING PATIENT EDUCATION: bipolar i disorder nos

Electronically Signed by CORONADO, DIANA R.N. on 05/13/2004.
##And No Others##

32-10

Scanned by GALVAN, JESUS PCA in facility LOPEZ on 05/16/2004 13:51

PATIENT: Robertson, Bricky DATE: 5/16/04 TIME IN: 1:15 OUT: 0120 (AM) PM
FACILITY: RL DOB: AGE: 37 YRS CALLER: Sgt Zamora
CHIEF COMPLAINT: C/o difficulty breathing Onset 1 month ago. States he thinks its anxiety

PATIENT'S STATED PROBLEM — CIRCLE AROUND = POSITIVE LINE THROUGH = NEGATIVE QUESTION MARK = UNKNOWN

PAIN
ONSET ____
SITE ____
RADIATE ____
PAIN L – M – S
CONSTANT/ OFF ON
MOVEMENT ↑ ↓
SHARP
ROM ↓

ABDOMEN PAIN
ONSET ____
SITE ____
TRAUMA ____
PAIN L – M
◆PAIN - SEVERE
CONSTANT/ OFF ON
NORMAL GAIT
◆UNABLE TO WALK
◆SPLINT ABDOMEN
DIARRHEA – VOMIT
✱BRIGHT RED BLOOD
◆ DARK TARRY STOOL
LAST ATE
INDIGESTION
CONSTIPATION
PREGNANT – LMP
FEVER – CHILLS

RASH / REACTION
ONSET ____
SITE ____
SPREAD ____
FEVER ____
NEW RX ____
STING/BITE # ____
1.TYPE ____
RED – SWOLLEN
ALLERGIC HX
✱S.O.B. L – M – S
✱FACIAL SWELLING
ITCHING
RAISED – HIVES

NOSEBLEED
ONSET ____
TRAUMA ____
BLOOD L – M – S
HX HYPERTENSION
STOP ATTEMPTS ____

CHEST PAIN
ONSET ____
DURATION ____
FREQUENCY ____
SITE ____
✱ RADIATE
✱ARM – JAW
✱NECK – BACK
PAIN L – M – S
CONSTANT/ OFF ON
✱DULL – HEAVY
✱SHARP – STABBING
INDIGESTION
✱S.O.B.
PALPITATIONS
WEAK – TIRED
✱NO NITRO RELIEF/S ____
CARDIAC HX
✱NAUSEA& VOMITING

FEVER
ONSET ____
PAST ____
NOW ____
CONSTANT/ OFF ON
CHILLS
◆ STIFF NECK
1. CHIN TO CHEST
2. TO SHOULDER

VOMITING/DIARRHEA
ONSET ____
#/6 HRS ____
LAST TIME ____
NEW RX ____
LAST ATE ____
NAUSEA – DIZZY
◆BLOOD PRESENT
PRIOR HX SAME
◆ RECENT PATTERN CHANGE

SKIN BREAK
HOW ____
SITE ____
SIZE ____
WHEN ____
CUT–FOREIGN BODY
BITE – PUNCTURE
SCRAPE
ROM ↓
BLEEDING L
◆ BLEEDING M – S
✱PENETRATING INJURY
◆ NUMBNESS
◆ TINGLING

HEAD INJURY
HOW ____
WHEN ____
PAIN L – M
◆ PAIN SEVERE
✱ UNCONSCIOUS
ORIENTED X 3
✱ VOMITING # ____
✱ SPEECH SLURRED
✱ EAR DRAINAGE
ATAXIA – DIZZY
NECK PAIN
NUMB TINGLING
✱ CONFUSION

NEUROLOGY
◆ SEIZURE
ORIENTED X 3
HEADACHE L – M
◆ HEADACHE SEVERE
DIZZY
✱ SPEECH SLURRED
NAUSEA – VOMITING
◆ WEAKNESS
◆ 1. GENERAL
◆ 2. ONE SIDE ____
NUMB – TINGLING

URINATION
PAIN L-M
◆PAIN SEVERE
SITE ____
ONSET ____
DISCHARGE ____
FREQUENCY – ODOR
URGENCY -BURNING
INCONTINENT
BLOOD – HX STONE
◆RETENTION > 6 HRS
PAIN –BACK/FLANK
FEVER

CONGESTION
ONSET ____
◆ S.O.B.
COUGH L-M-S
1. PRODUCTIVE
2. COLOR ____
SINUS
1. DISCHARGE
2. COLOR ____
SNEEZING
HEADACHE
MUSCLE ACHES
SORE THROAT
ALLERGY ____
FEVER – CHILLS

DIABETES
INSULIN – PILL
LAST DOSE ____
LAST ATE ____
BLOOD SUGAR ____
ORIENTED X 3
✱ CONFUSED
DIZZY
✱UNCONSCIOUS
◆ VOMITING– FEVER

SKELETAL INJURY
HOW ____
SITE ____
WHEN ____
PAIN L – M – S
✱BONE DEFORMITY
◆ DISLOCATION
◆ TINGLING
◆ NUMBNESS
ROM – EDEMA ↓
WEIGHT BEARING ↓

EAR R - L
ONSET ____
PAIN L – M – S
TRAUMA ____
FOREIGN BODY ____
DISCHARGE L-M-S
1. COLOR ____
SORE THROAT
HEARING ↓
COLD – FEVER

EYE R - L
ONSET ____
◆ TRAUMA ____
PAIN L – M
◆ PAIN SEVERE
◆ FOREIGN BODY ____
◆VISION BLURRED
DISCHARGE L-M-S
1. COLOR ____
EYE RED
ALLERGY – FEVER
LIGHT SENSITIVE
SWELLING

INFECTION/WOUND
ONSET ____
SITE ____
DRAINAGE ____
SWOLLEN-RED
PAIN L-M-S
FEVER-CHILLS
◆ OVER JOINT
◆ MID FACE

THROAT
ONSET ____
PAIN L-M-S
DIFFICULTY SWALLOWING
RED THROAT
SWOLLEN GLANDS
◆ CHOKING
✱ DROOLING
◆ STIFF NECK
ABLE TO TURN HEAD
COLD – FEVER

GYNECOLOGY
ONSET ____
ABD PAIN L-M
◆ ABD PAIN- SEVERE
NORMAL WALK
HX – PMS/CYST
HX DYSMENORRHEA
HX ENDOMETRIOSIS
BLEEDING L – M
◆ BLEEDING SEVERE
1. PADS/6 HRS ____
2. CLOTS – TISSUE
PREGNANT ____
LMP ____
1. REG OR IRREG
DISCHARGE L-M-S
1. COLOR ____
VAGINAL AREA
1. REDNESS - ODOR
2.BURNING-ITCHING

PSYCHIATRIC SYMPTOMS
HALLUCINATIONS
DEPRESSED
AGITATED
✱ SELF INJURIOUS THOUGHTS/BEHAVIOR
PLAN: YES NO
◆ SELF-MUTILATION
PSYCH ON CALL NOTIFIED:
NAME: ____
TITLE: ____

BREATHING PROBLEMS
ONSET ____
S.O.B. L – M
✱ S.O.B. SEVERE
HX OF ASTHMA
WHEEZING L – M
✱ WHEEZING SEVERE
✱ STRIDOR
COUGH
FEVER - CHILLS
HX EMPHYSEMA
1. ANKLE EDEMA
2. CHEST PAIN

Have you tried any treatments? (None)
Hx medical / medications? None Lithium
Recent facility treatment? (None)
Comments: States he feels his panic attacks are getting worse and has been trying to come in to be eval. by psychiatrist. Pt reassured, will be eval this Am.
Consult with on-call provider (NO) YES → Telephone orders: ____

On-call provider signature / Date

Instructed patient and security that if signs and symptoms increase or no improvement within 2 hours to contact security for RN call back YES NO

NURSING ACTION / DISPOSITION:
☐ ✱ Emergent – Activate 911
☐ ◆ Urgent –patient/security advised pt. will be seen by healthcare provider within the next 1-2 hours
☒ Non-acute – patient/security advised pt. will be scheduled for follow-up nursing evaluation in AM

Instructions understood / accepted by patient / security: (YES) NO NA
RN Signature: Amaza RN

THESE GUIDELINES DO NOT REPLACE SOUND NURSING JUDGMENT NOR ARE THEY INTENDED TO STRICTLY APPLY TO ALL PATIENTS. RN'S ARE EXPECTED TO USE SOUND CLINICAL PRACTICE AND JUDGMENT IN ALL SITUATIONS. Revised 04/15/2003

CORRECTIONAL MANAGED CARE
CLINIC NOTES - NURSING

'atient Name: ROBERTSON, RICKY L **TDCJ#:** 1172218 **Date:** 05/16/2004 13:31
'acility: LOPEZ
[redacted]t recent vitals from 05/16/2004: BP: 155 / 78 (Sitting) Wt. 235 Lbs. Height Pulse: 60 (Sitting) Resp.: 20 / min
[redacted]p: 98.7 (Oral)
'urrent Medications:
ITHIUM CARBONATE 300MG CAPS, 3 CAPS ORAL(po) BID
Special Instructions: EQUI=ESKALITH.

'urrent Lab Tests:
llergies: NO KNOWN ALLERGIES
'oday's Problem: PT WAS CALLED DOWN DUE TO COMPLAINTS HE HAD EARLIER THIS AM. PT. 'TATES " I FEEL LIKE MY PANIC ATTACK ARE BECOMING MORE AND MORE FREQUENT. ALSO, I IAVE RINGING IN THE EARS"
)) AWAKE AND ALERT. SKIN WARM AND DRY. IN NO RESP DISTRESS. LUNGS CLEAR THROUGHOUT. O2 'AT 99% ROOM AIR. PEAK FLOWS 500, 520, AND 620. NAIL BEDS PINK. HX. PANIC ATTACKS CURRENTLY 'AKING LITHIUM. STATES THE RINGING IN THE EARS HAS BEEN GETTING WORSE. DENIES TAKING NY ASPIRIN. STATES THAT HE HAS ALSO BEEN WANTING TO COME IN TO BE EVAL. BY THE 'SYCHIATRIST
) KNOWLEDGE DEFICIT

Name of interpreter, if required:

'lan is as follows:PT REASSURED. INST TO CONCENTRATE ON HIS BREATHING WHEN HE STARTS TO GET NXIOUS. SCHEDULED FOR PA APPT IN AM FOR EVAL. OF THE RINGING IN THE EARS. VERBALIZES [redacted]ERSTANDING INST. WILL E-MAIL MENTAL HEALTH

rocedures Ordered:
NURSING LEVEL1 COMPLETE VISIT: observation- cond not found
NURSING COPAY CHARGE $3 (ADD-ON CODE): observation- cond not found
NURSING PATIENT EDUCATION: observation- cond not found

Electronically Signed by MATA, IDOLISA R.N. on 05/16/2004.
##And No Others##

CORRECTIONAL MANAGED CARE
CLINIC NOTES - NURSING

Patient Name: ROBERTSON, RICKY L **TDCJ#:** 1172218 **Date:** 05/21/2004 11:14
Facility: LOPEZ
Most recent vitals from 05/19/2004: BP: 144 / 77 (Sitting) Wt. 232 Lbs. Height Pulse: 77 (Sitting) Resp.: 12 / min Temp: 98.6 (Oral)
Current Medications:
CHLORPROMAZINE HCL 50MG TABS, 1 TABS ORAL(po) BID
Special Instructions: EQUI=THORAZINE. *NON-KOP*, MAY CAUSE DROWSINESS OR DIZZINESS, MAY IMPAIR THE ABILITY TO DRIVE OR OPERATE MACHINERY, THIS STRENGTH RESTRICED FROM UNIT STOCK, VERY IMPORTANT TO TAKE OR USE THIS EXACTLY AS DIRECTED
LITHIUM CARBONATE 300MG CAPS, 3 CAPS ORAL(po) BID
Special Instructions: EQUI=ESKALITH.
METAMUCIL PACKETS, 1 PACKETS ORAL(po) QD
Special Instructions: EQUI=PSYLLIUM, KONSYL. KOP X 14D
PSEUDO TABS 30MG TABS, 1 TABS ORAL(po) BID
Special Instructions: EQUI=PSEUDOEPHEDRINE, SUDAFED. KOP X 7D

Current Lab Tests:
Allergies: NO KNOWN ALLERGIES
Today's Problem: DR.FAUST GAVE VERBAL MEDICATION ORDERS

Name of interpreter, if required:

Plan is as follows:ADMINISTER THORAZINE 50 MG PO X1 NOW
V.O DR.FAUST/ I.MATA,RN

Electronically Signed by MATA, IDOLISA R.N. on 05/21/2004.
Electronically Signed by FAUST, HARRY L M.D. on 05/21/2004.
##And No Others##

CORRECTIONAL MANAGED CARE
CLINIC NOTES - NURSING

Patient Name: ROBERTSON, RICKY L **TDCJ#:** 1172218 **Date:** 06/25/2004 07:45
Facility: LOPEZ
Most recent vitals from 06/21/2004: BP: 158 / 85 (Sitting) Wt. 227 Lbs. Height Pulse: 96 (Sitting) Resp.: 20 / min Temp: 96 (Oral)
Current Medications:
BENZTROPINE MESYLATE 2MG TABS, 1 TABS ORAL(po) BID
Special Instructions: EQUI=COGENTIN. NON-KOP
CHLORPROMAZINE HCL 50MG TABS, 2 TABS ORAL(po) BID
Special Instructions: EQUI=THORAZINE. *NON-KOP*, MAY CAUSE DROWSINESS OR DIZZINESS, MAY IMPAIR THE ABILITY TO DRIVE OR OPERATE MACHINERY, THIS STRENGTH RESTRICED FROM UNIT STOCK, VERY IMPORTANT TO TAKE OR USE THIS EXACTLY AS DIRECTED
LITHIUM CARBONATE 300MG CAPS, 3 CAPS ORAL(po) BID
Special Instructions: EQUI=ESKALITH.
SYMMETREL 100MG CAPS, 1 CAPS ORAL(po) BID
Special Instructions: EQUI=AMANTADINE

Current Lab Tests:
Allergies: NO KNOWN ALLERGIES
Today's Problem:
VERBAL ORDER VIA DMS FROM DR FAUST

Name of interpreter, if required:

Plan is as follows:
1) AMANTADINE 100MG BID X 30 DAYS X 11 AR
2) COGENTIN 2MG BID X 30 DAYS X 11 AR.
DR. FAUST/ JCANTU, LVN

Electronically Signed by CANTU, JUDITH L.V.N. on 06/25/2004.
Electronically Signed by FAUST, HARRY L M.D. on 06/25/2004.
##And No Others##

CORRECTIONAL MANAGED CARE
NURSING ASSESSMENT PROTOCOL FOR
PSYCHIATRIC SYMPTOMS

Patient Name: ROBERTSON, RICKY L **TDCJ#:** 1172218 **Date:** 06/27/2004 16:46 **Facility:** LOPEZ
Most recent vitals from 06/27/2004: BP: 133 / 82 (Sitting) Wt. 226 Lbs. Height Pulse: 94 (Sitting) Resp.: 18 / min Temp: 98.2 (Oral)
Current Medications:
BENZTROPINE MESYLATE 2MG TABS, 1 TABS ORAL(po) BID
Special Instructions: EQUI=COGENTIN. NON-KOP
CHLORPROMAZINE HCL 50MG TABS, 2 TABS ORAL(po) BID
Special Instructions: EQUI=THORAZINE. "NON-KOP". MAY CAUSE DROWSINESS OR DIZZINESS, MAY IMPAIR THE ABILITY TO DRIVE OR OPERATE MACHINERY. THIS STRENGTH RESTRICED FROM UNIT STOCK, VERY IMPORTANT TO TAKE OR USE THIS EXACTLY AS DIRECTED
LITHIUM CARBONATE 300MG CAPS, 3 CAPS ORAL(po) BID
Special Instructions: EQUI=ESKALITH.
SYMMETREL 100MG CAPS, 1 CAPS ORAL(po) BID
Special Instructions: EQUI=AMANTADINE

Allergies: NO KNOWN ALLERGIES
Name of Interpreter, if required:

NP - PSYCHIATRIC SYMPTOMS
Subjective Data
1. Chief Complaint (Describe): " EVER SINCE MY MEDICATIONS WERE CHANGED I HAVE BEEN SEEING SPIDERS AND THINGS THAT ARE NOT THERE"
2. Significant Medical And Psychiatric History (Describe): BIPOLAR D/O MANINC
3. Patient Complaint:
Agiatated (Excess Movement)
Hallucinations
Visual
Yes SEEING SPIDERS AND CANDY WRAPPERS
4. Date Of Onset Of Current Symptoms: 6/26/04
5. Self-Injurious Thoughts/Behavior?
No
6. History Of Suicide Attempts?
No
7. History Of Self-Mutilation?
No
8. Thoughts Of Hurting Others?
No
Objective Data
1. Current Behavior:
Agitated
2. Physical Appearance:
Clean
3. Currently On Psychiatric Medication?
Yes
Compliance:
Good
4. History Of Psychiatric Care?
Yes
5. Previous Crisis Management Admit?
No

CORRECTIONAL MANAGED CARE
NURSING ASSESSMENT PROTOCOL FOR
PSYCHIATRIC SYMPTOMS

Patient Name: ROBERTSON, RICKY L **TDCJ#:** 1172218 **Date:** 06/27/2004 16:46 **Facility:** LOPEZ

6. Previous Inpatient Admission?
   No
7. Is Patient Oriented To:
   Person:
   Yes
   Place:
   Yes
   Date:
   Yes
8. Speech:
   Slow
9. Motor Activity:
   Agiatated/Restless
10. Eye Contact:
   Poor

Comments:

<insert tree here>

NURSING ACTION: If based upon your collection of the above data, a Registered Nurse's professional judgement is required or you have any question about how to proceed, you must consult with a Registered Nurse while the patient is still on site. Otherwise, proceed with protocol.
CALLED MR.GOMEZ,PA/C ORDERS RECEIVED:
1) TRANSFER TO J4 FOR STABILIZATION
T.O MR.GOMEZ PA/C I.MATA,RN
TREATMENT PLAN:

- Recheck abnormal V/S and report to provider if indicated.
- Refer patient to the Mental Health Services if staff is onsite.
- If no Mental Health Services staff are onsite:
  - If this is non-emergent and there **is NO threat to self or others**, refer to Mental Health Services the next working day.
  - If there **IS a threat to self or others**, or patient has deteriorated to level of not functioning appropriately, **IMMEDIATELY** contact on-call psychiatrist.

PATIENT INSTRUCTIONS:

- Return to clinic or notify nurse if symptoms worsen.

16:10 SPOKE TO PENNY HASHOP ANP PSYCH ON CALL: ORDERS WERE:
1) TRANSFER TO J4 FOR STABILIZATION WITH RECOMMENDATION FOR DNE
T.O MS.HASHOP ANP/ I.MATA,RN
1615: PT STATING " I AM NOT LEAVING THIS UNIT, I WANT TO SIGN THE PAPER SO THAT I DON'D GO"
16:25: MS.HASHOP NOTIFIED OF PT'S REFUSAL TO LEAVE THE UNIT: ORDERS WERE:
1) CANCEL TRANSFER ORDERS.
2) ADMINISTER THORAZINE 100 MG X1 NOW ALONG WITH THE THORAZINE ORDERED FOR THIS PM.
3) REFER TO PSYCH IN THE AM.
T.O MS.HASHOP ANP/ I.MATA,RN

PT MUMBLING WANTING TO KNOW WHAT IT IS THAT THEY DO THERE AND CONCERNED THAT IF HE LEAVES TO J4 HE WILL NOT COME BACK HERE, NOW STATING THAT IT IS BETTER HE GOES BECAUSE NOW HE KNOW WHY HE IS BEING SENT.

17:00 SPOKE TO MS.HASHOP ANP: ORDERS RECEIVED:
1) CANCEL EXTRA THORAZINE 100 MG ORDER.
2) TRANSFER TO J4 FOR CRISIS MANAGEMENT
3) ADMINISTER EVENING MEDICATION AS ORDERED
T.O PENNY HASHOP, ANP I.MATA,RN

705: REPORT CALLED TO J4 SPOKE TO GREG PANIGNDAPAN,RN
ISN 70 (4-03)

EMERALD CLINICAL PATIENT SUMMARY

LOPEZ EDINBURG, TX
Sunday , June 27, 2004 17:17 PM

Name: **ROBERTSON, RICKY L**
HCR BOX 1000
BEEVILLE, TX 78102
Phone:
MRN: 1172218
DOB: 08/21/1966
Age: 37 Years
Next of Kin:
Living will: No
Language:

Work:
SSN: [redacted]
Sex: MALE
Race: WHITE

Begin/End Range: 06/15/2004 to 06/27/2004
No. of Admissions: 5
First Admission Date: 06/15/2004
Last Admission Date: 06/27/2004
Date of Death:

Other Providers:
CANTU, JUDITH
CANTU, JUDITH
CORONADO, DIANA
DENISON, BARBARA J
FAUST, HARRY L
GONZALEZ, MIGUEL
GULLEM, RENE P
LAPOINT, PATRICIA
LAPOINT, PATRICIA
MATA, IDOLISA
MCCLELLAN, BERNAIDA P
MERCADO, STEVEN A
OZUNA, MELISSA
UNKNOWN, UNKNOWN

INSURANCE INFORMATION

No Insurance information for this patient.

CHRONIC CARE

B CLASS 0 (NO EXPOSURE PULM. TUBERCULOSIS)
First Observed: 06/26/2003 12:27 *ICD9: 011.* *Diag Group: PRIMARY* *Status: Active*

NURSE PROTOCOL

P - PSYCHIATRIC SYMPTOMS
First Observed: 06/27/2004 16:51 *ICD9: HSN-70* *Diag Group: SECONDARY* *Status: Active*

06/27/2004 17:22 MATA, IDOLISA R.N.

Subjective Data: 1. chief complaint (describe): , 2. significant medical and psychiatric
story (de
scribe): 3. patient complaint::
Subjective Data: 1. chief complaint (describe): , 2. significant medical and psychiatric
story (de
scribe): 3. patient complaint:: , agiatated (excess movement)
ha
llucinations:
Subjective Data: 1. chief complaint (describe): , 2. significant medical and psychiatric
tory (de

EMERALD CLINICAL PATIENT SUMMARY

LOPEZ EDINBURG, TX
Sunday , June 27, 2004 17:17 PM

PSYCHIATRIC SYMPTOMS (continued)

scribe): 3. patient complaint:: , agiatated (excess movement)

ha

llucinations: visual:

Subjective Data: 1. chief complaint (describe): , 2. significant medical and psychiatric history (de

scribe): 3. patient complaint:: , agiatated (excess movement)

ha

llucinations: visual: , yes

5. Self-Injurious Thoughts/Behavior?: no

6. History Of Suicide Attempts?: no

7. History Of Self-Mutilation?: no

8. Thoughts Of Hurting Others?: no

Objective Data: 1. current behavior::

Objective Data: 1. current behavior:: agitated

Objective Data: 1. current behavior:: agitated 2.

hysical appea

rance::

Objective Data: 1. current behavior:: agitated 2.

hysical appea

rance:: clean

Objective Data: 1. current behavior:: agitated 2.

hysical appea

rance:: clean 3. currently on psychiatric medication?:

Objective Data: 1. current behavior:: agitated 2.

hysical appea

rance:: clean 3. currently on psychiatric medication?:

yes:

Objective Data: 1. current behavior:: agitated 2.

ysical appea

rance:: clean 3. currently on psychiatric medication?:

yes: compliance::

Objective Data: 1. current behavior:: agitated 2.

ysical appea

rance:: clean 3. currently on psychiatric medication?:

yes: compliance:: good

4. History Of Psychiatric Care?: yes

5. Previous Crisis Management Admit?: no

6. Previous Inpatient Admission?: no

7. Is Patient Oriented To:: person::

7. Is Patient Oriented To:: person:: yes

7. Is Patient Oriented To:: person:: yes place::

7. Is Patient Oriented To:: person:: yes place:: yes

7. Is Patient Oriented To:: person:: yes place:: yes

date::

7. Is Patient Oriented To:: person:: yes place:: yes

date:: yes

8. Speech:: slow

EMERALD CLINICAL PATIENT SUMMARY

LOPEZ EDINBURG, TX
Sunday , June 27, 2004 17:17 PM

PSYCHIATRIC SYMPTOMS (continued)
9. Motor Activity:: agiatated/restless

PROBLEM LIST

ALLERGIES
First Observed: 05/17/2004 11:42 *ICD9: 477.9* *Diag Group: PRIMARY* *Status: Active*

BIPOLAR I DISORDER NOS
First Observed: 04/16/2004 12:00 *ICD9: 296.80* *Diag Group: PRIMARY* *Status: Active*

CONSTIPATION
First Observed: 12/23/2003 11:31 *ICD9: 564.0* *Diag Group: PRIMARY* *Status: Active*

DISORDERS OF EAR NOS
First Observed: 05/17/2004 11:44 *ICD9: 388* *Diag Group: PRIMARY* *Status: Active*

HEADACHE
First Observed: 12/23/2003 11:32 *ICD9: 784.0* *Diag Group: PRIMARY* *Status: Active*

OBSERVATION- COND NOT FOUND
First Observed: 05/07/2004 07:09 *ICD9: V71* *Diag Group: PRIMARY* *Status: Active*

PHYSICAL EXAMINATION
First Observed: 09/09/2003 11:05 *ICD9: V70.7* *Diag Group: PRIMARY* *Status: Active*

CURRENT MEDICATIONS

Start Date Time	Auto Stop Date Time	Drug	Dose			Last Date Time	Ordered ERemarks
6/25/2004 07:45	NONE	BENZTROPINE MESYLATE 2MG TABS	1	TABS	ORA BID	N/A	FAUST, HARRY L
pecial Instruction:	EQUI=COGENTIN. NON-KOP						
5/21/2004 13:23	NONE	CHLORPROMAZINE HCL 50MG TABS	2	TABS	ORA BID	N/A	FAUST, HARRY L
pecial Instruction:	EQUI=THORAZINE. *NON-KOP*, MAY CAUSE DROWSINESS OR DIZZINESS, MAY IMPAIR THE ABILITY TO						
RIVE OR OPE							
	RATE MACHINERY, THIS STRENGTH RESTRICED FROM UNIT STOCK, VERY IMPORTANT TO TAKE OR USE						
HIS EXACTLY							
	AS DIRECTED						
5/21/2004 10:58	NONE	LITHIUM CARBONATE 300MG CAPS	3	CAPS	ORA BID	N/A	FAUST, HARRY L
pecial Instruction:	EQUI=ESKALITH.						
7/25/2004 07:44	NONE	SYMMETREL 100MG CAPS	1	CAPS	ORA BID	N/A	FAUST, HARRY L
pecial Instruction:	EQUI=AMANTADINE						

McCollum v. Robertson 4:14-cv-03253

EMERALD CLINICAL PATIENT SUMMARY

LOPEZ EDINBURG, TX
Sunday , June 27, 2004 17:17 PM

ALLERGIES

First Observed	Allergen	Reaction	Severity
07/20/2003	NO KNOWN ALLERGIES *Comment: N/A*		N/A

REMINDERS

Date Time — Last Appointment for Current Facility: LOPEZ

06-25-2004 10:30 AM
For: - +DMS
Reminder: +DMS PSYCH F/U VISIT (30MIN)
Comments:

Date Time — Reminders for Current Facility: LOPEZ

08-25-2004 02:34 PM
For: BARBARA DENISON - MENTAL HEALTH
Reminder: MH-AIMS
Comments: SCHEDULE AIMS

06-30-2004 07:41 AM
For: BARBARA DENISON - MENTAL HEALTH
Reminder: MH-FOLLOW-UP
Comments: F/U PER MED CHANGE

Date Time — Past Due Reminders for Current Facility: LOPEZ

6-25-2004 10:30 AM
For: - +DMS
Reminder: +DMS PSYCH F/U VISIT (30MIN)
Comments:

PAST ADMISSIONS

dmit ate	Disch. Date	Discharge Type	MRN	Facility Name	Facility Location	Admitting Physician
/27/2004			1172218	LOPEZ	EDINBURG, TX	IDOLISA MATA
/25/2004	06/25/04	RELEASED	1172218	LOPEZ	EDINBURG, TX	HARRY FAUST
/21/2004	06/21/04	RELEASED	1172218	LOPEZ	EDINBURG, TX	IDOLISA MATA
/16/2004	06/16/04	RELEASED	1172218	LOPEZ	EDINBURG, TX	BARBARA DENISON
15/2004	06/15/04	OTHER	1172218	LOPEZ	EDINBURG, TX	BARBARA DENISON
)8/2004	06/08/04	RELEASED	1172218	LOPEZ	EDINBURG, TX	MIGUEL GONZALEZ
)2/2004	06/02/04	RELEASED	1172218	LOPEZ	EDINBURG, TX	BARBARA DENISON
11/2004	06/01/04	OTHER	1172218	LOPEZ	EDINBURG, TX	BARBARA DENISON
[redacted]	05/25/04	RELEASED	1172218	LOPEZ	EDINBURG, TX	BARBARA DENISON

EMERALD CLINICAL PATIENT SUMMARY

LOPEZ EDINBURG, TX
Sunday , June 27, 2004 17:17 PM

2004	05/21/04	RELEASED	1172218	LOPEZ	EDINBURG, TX	IDOLISA MATA

MAJOR PROCEDURES

No Procedures for the date range specified.

RECENT PROCEDURES / STUDIES

Date Performed	Facility	Description	CPT Code
27-JUN-04	LOPEZ	NURSING LEVEL1 COMPLETE VISIT	N9391
27-JUN-04	LOPEZ	NURSING PATIENT EDUCATION	N9391
25-JUN-04	LOPEZ	MH OP FOLLOW-UP	00700
25-JUN-04	LOPEZ	TELE PSYCH CONSULT	90806
21-JUN-04	LOPEZ	PPD INJECTION REQUEST/ORDER	90799
16-JUN-04	LOPEZ	MH OP SICK CALL/REFERRAL TRIAGE	00100
08-JUN-04	LOPEZ	FOLLOW UP OFFICE VISIT	99213
25-MAY-04	LOPEZ	MH OP ASSESSMENT/EVALUATION	15786
25-MAY-04	LOPEZ	NURSING EKG	N9391
19-MAY-04	LOPEZ	BRIEF OFFICE VISIT (LEVEL 1)* COPAY*	99201
17-MAY-04	LOPEZ	INTERMED OFFICE VISIT - LEVEL 2 (NO COPAY)	99203
6-MAY-04	LOPEZ	NURSING COPAY CHARGE $3 (ADD-ON CODE)	10060
7-MAY-04	LOPEZ	*NURSING INJECTION	90799
7-MAY-04	LOPEZ	CHEMISTRY 10 PANEL {INCLUDES NA,K,CL,TCO2,BUN,GLU,CREAT,CA,PHOS,MG} (CHEM1	84295/L}
7-MAY-04	LOPEZ	LITHIUM, SERUM (LITHIUM) {PSYL}	80178
7-MAY-04	LOPEZ	THYROID STIMULATING HORMONE (TSH)(BFPSYL)	84443
5-APR-04	LOPEZ	EXTENDED OFFICE VISIT (LEVEL 3) *COPAY*	99205
3-SEP-03	LOPEZ	BRIEF OFFICE VISIT - LEVEL 1 (NO COPAY)	99201

EMERALD CLINICAL PATIENT SUMMARY

LOPEZ EDINBURG, TX
Sunday , June 27, 2004 17:17 PM

IMMUNIZATION AND VACCINATION STATUS

Date Performed	Facility	Description
06/21/2004	LOPEZ	PPD INJECTION REQUEST/ORDER
05/07/2004	LOPEZ	*NURSING INJECTION

REFERRALS

No Referrals for the date range specified.

CULTURE RESULTS

No Culture Results for the date range specified.

EMERALD CLINICAL PATIENT SUMMARY

LOPEZ EDINBURG, TX
Sunday , June 27, 2004 17:17 PM

LAB RESULTS for last 3 dates - Horizontal

UNCLASSIFIED

	PPD
06/23/2004 13:59	0 MM

VITAL SIGNS

Taken	Blood Pressure			Pulse					
Date Time	Supine	Sitting	Standing	Supine	Sitting	Standing	Resp	Weight	Temp
6/27/2004 16:50		133 / 82			94		18	226 LB	98.2 - PO
6/21/2004 08:27		158 / 85			96		20	227 LB	96 - PO
6/08/2004 13:15		130 / 80			85		16	227 LB	98.2 - PO
6/19/2004 11:15		144 / 77			77		12	232 LB	98.6 - PO
6/17/2004 11:35		134 / 76			67		20	232 LB	98 - PO
6/16/2004 13:34		155 / 78			60		20	235 LB	98.7 - PO

UTMB CORRECTIONAL MANAGED CARE
MENTAL HEALTH SERVICES
DIAGNOSTIC & EVALUATION DISCHARGE SUMMARY

I. IDENTIFYING DATA

NAME: ROBERTSON, RICKY
DATE OF ADMISSION: 6/30/2004
TDCJ#: 1172218 B2B-003
DATE OF DISCHARGE: 7/9/2004
REFERRING FACILITY: RL
REFERRING CLINICIAN:

II. REASON FOR ADMISSION

Decompensation

III. REFERRING DIAGNOSIS

AXIS I: 296.8
AXIS II: Deferred

IV. FINAL D&E DIAGNOSIS

AXIS I: ~~296.5~~ 296.52 Bipolar I D/O, MRE Depressed, Moderate
AXIS II: Deferred
AXIS III: Deferred
AXIS IV: Incarceration
AXIS V: 70

V. DISPOSITION

- ☐ PATIENT IS IN NEED OF INPATIENT MENTAL HEALTH CARE AT THIS TIME
- ☒ PATIENT IS NOT IN NEED OF INPATIENT MENTAL HEALTH CARE AT THIS TIME
- ☐ PATIENT COULD BENEFIT FROM INPATIENT MENTAL HEALTH CARE BUT WILL NOT VOLUNTARILY CONSENT TO ADMISSION AND DOES NOT MEET THE INVOLUNTARY COMMITMENT CRITERIA
- ☐ PATIENT'S CONDITION IMPROVED DURING D&E STAY AND HE/SHE IS ABLE TO RETURN TO THE OUTPATIENT SETTING

VI. RECOMMENDATIONS (CHECK ALL THAT APPLY)

- ☐ INITIATE INPATIENT MENTAL HEALTH CARE; TRANSFER TO _____ PROGRAM
- ☒ INITIATE/CONTINUE OUTPATIENT MENTAL HEALTH CARE
  - ☒ MEDICATIONS AS ORDERED
  - ☒ COUNSELING/PSYCHOTHERAPY
- ☐ PATIENT HAS A HISTORY OF POOR MEDICATION COMPLIANCE; MONITOR CLOSELY
- ☐ MONITOR FOR SIGNS OF DECOMPENSATION & POSSIBLE FUTURE INVOLUNTARY COMMITTMENT
- ☒ OTHER: S3NT; III.19,20,21,23,25,26,27; IV.B, V.C

Cheryl Knox, MD, [ ]Karl Yu, PA-C, Psychiatry — 7/9/2004 DATE

MHS D-2.1 (01/03)

Name: ROBERTSON, RICKY
TDCJ No.: 1172218
Unit: J4 B2B-003

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Date & Time	Notes
7/9/2004	D&E Day 7 Therapist: GADBAN/T
9:15 Am.	S: Pt seen cell front
	The patient states, " I was feeling pain and anxiety. I got out in August — Harris Co. I'm going to a halfway house. I'm not suicidal
	Denies AH currently
	O: Not agitated, no acute distress
	Mood/Affect: euthymic / congruent
	Sensorium: clear
	Thought Processes: goal directed
	Thought Content: (−) AH, (−) SI
	A: 298.9
	P: See D&E Discharge Summary
	D/C to UOA
	Cont current meds.
	[signature] [X]Daryl Knox, MD, [ ]Karl D. Yu, PA-C, Psychiatry

Please sign each entry with status
HSM – 1 (Rev - 5/92)

CLINIC NOTES

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Robertson, Rickey
TDCJ No.: 1172218
Unit: J4

Date & Time	Notes
7/7/04 1430	Talked to pt in day room for PE, pt stated c/o seeing spiders (hundreds of them) Add Thorazine 50mg BID x 30 d/ ~~TPO~~
	Cont. Thorazine 100mg TPO BID (So total dose is 150mg BID)

Please sign each entry with status.

I - 1 (Rev. 5/92)

828-03

1 ATTACHMENT A – [redacted]S VI.A

TEXAS DEPARTMENT OF CRIMINAL JUSTICE

INSTITUTIONAL DIVISION
Jester IV Psychiatric Facility
PSYCHIATRIC EVALUATION

I: Identif[redacted]ata
II: Reason [redacted]eferral
III: Chief Complaint
IV: Pertinent Psychiatric History
V: Pertinent Medical History
VI: Pertinent Physical Findings
VII: Mental Status Examination
VIII: Summary of Findings
IX: DSM IV Diagnosis (Axis I-V)
XI: Recommendation/Interventions
XII: Prognosis
XIII: Signature/Date

Inmate Name: Robertson, Ricky **TDCJ-ID: 1172218**
Date of Report: 07/07/04 **D & E Day 7: 7/9/2004**

The patient consents to treatment by the undersigned.

IDENTIFYING DATA:

UOA: RL
DOB: 8/21/1966

REASON FOR REFERRAL:

Decompensation—see the following note by unit staff on 6/27/04 for reason for referral:

P - PSYCHIATRIC SYMPTOMS
Subjective Data
1. Chief Complaint (Describe): " EVER SINCE MY MEDICATIONS WERE HANGED I HAVE BEEN SEEING SPIDERS AND THINGS THAT ARE NOT THERE"
2. Significant Medical And Psychiatric History (Describe): BIPOLAR D/O MANINC
3. Patient Complaint:
Agiatated (Excess Movement)
Hallucinations
Visual
Yes SEEING SPIDERS AND CANDY WRAPPERS
4. Date Of Onset Of Current Symptoms: 6/26/04
5. Self-Injurious Thoughts/Behavior?
No
6. History Of Suicide Attempts?
No
7. History Of Self-Mutilation?
No
8. Thoughts Of Hurting Others?
No

CHIEF COMPLAINT:

"I have Bipolar, I am now depressed. They changed my meds, and I started to see spiders." "No, I am not suicidal, I have never been suicidal, and I have never tried to kill myself. I don't want to hurt others." "They told me I had Bipolar in 1986. I got treatment at the Yipsalantic Hospital in Yipsalantic, Michigan." "Lithium worked well." "I got depressed about 2 weeks ago, I was worried if they would paroled me. They still have not decided yet." "I am still seeing spiders, hundreds of them." "I hear voices, it's not really talking, men and women, their mouth don't move. It's just noise. So, they don't really tell me anything. It's just noise."

2 ATTACHMENT A – [redacted]S VI.A

TEXAS DEPARTMENT OF CRIMINAL JUSTICE

INSTITUTIONAL DIVISION
Jester IV Psychiatric Facility
PSYCHIATRIC EVALUATION

I: Identif[redacted]Data
II: Reason [redacted]Referral
III: Chief Complaint
IV: Pertinent Psychiatric History
V: Pertinent Medical History
VI: Pertinent Physical Findings
VII: Mental Status Examination
VIII: Summary of Findings
IX: DSM IV Diagnosis (Axis I-V)
XI: Recommendation/Interventions
XII: Prognosis
XIII: Signature/Date

Inmate Name: Robertson, Ricky **TDCJ-ID: 1172218**
Date of Report: 07/07/04 **D & E Day 7: 7/9/2004**

PERTINENT PSYCHIATRIC HISTORY:
The referral diagnosis is None

History of Mental Illness:
The pt is a 37-year-old white male inmate who was referred to J4 for the above reason. He states that he was first diagnosed Bipolar D/O in Michigan in 1986. He is more manic than depressed and Lithium usually helps a lot. He also reports auditory and visual hallucination as above. He states that he was hearing voices and Thorazine was added to his regimen, but then he started to see spiders. Amatadine was later added due to his twitching movement w/ Thorazine. He denies ever been abused in any way as a child. He denies ASPD, PTSD symptoms. He denies any suicidal ideation and has never attempted to kill himself.

Depressive Symptoms—pt reports decreased appetite and sleep. No suicidal ideation or attempts
And he does not feel hopeless or helpless. No crying spell.
Manic Symptoms—currently no manic symptoms
Psychotic Symptoms--The patient reports auditory and visual hallucination as described above. Denies delusion, and denies the following symptoms: Audible thoughts, Voices conversing, Running commentary, Thought withdrawal, Thought insertion, Thought broadcasting, Made thoughts, Made sensations, Made actions
Anxiety Symptoms--The patient reports:
Feeling restless "keyed up" "on edge"
Being easily fatigued
Having difficulty concentrating
"Mind going blank"
Having racing thoughts (unpleasant)
Unsatisfying sleep
Palpitations
Sweating
Trembling/shaking
Shortness of breath
Smothering sensations
Feeling of choking

Antisocial Personality Symptoms-- The patient denies these symptoms

Chemical Abuse / Dependence Symptoms
The patient reports history of marijuana use
Alcohol—was a heavy drinker

3 ATTACHMENT A – [redacted]S VI.A

TEXAS DEPARTMENT OF CRIMINAL JUSTICE

INSTITUTIONAL DIVISION
Jester IV Psychiatric Facility
PSYCHIATRIC EVALUATION

I: Identif[redacted]Data
II: Reason for Referral
III: Chief Complaint
IV: Pertinent Psychiatric History
V: Pertinent Medical History
VI: Pertinent Physical Findings
VII: Mental Status Examination
VIII: Summary of Findings
IX: DSM IV Diagnosis (Axis I-V)
XI: Recommendation/Interventions
XII: Prognosis
XIII: Signature/Date

Inmate Name: Robertson, Ricky **TDCJ-ID: 1172218**
Date of Report: 07/07/04 **D & E Day 7: 7/9/2004**

PERTINENT MEDICAL HISTORY:
No surgeries
No major medical illnesses
No fractures
FAMILY AND SOCIAL HISTORY:
See D & E Psychosocial Evaluation
PERTINENT PHYSICAL FINDINGS:
Noncontributory
MENTAL STATUS EXAMINATION:
General Appearance, Behavior, and Speech
Dress: White TDCJ garment
Hygiene: well kempt
Psychomotor activity: not increased/decreased
Behavior: facial expression is appropriate to thought content
Eye contact: good
Speech: spontaneous, not monotonous, normal rate and volume, no abnormality otherwise
Mood and Affect
Mood: mildly depressed Affect: Normal range and intensity, stable and appropriate
Sensorium and Cognitive Functioning
Sensorium: clear
Orientation: oriented to time, place, person, and situation
Immediate, Short-term and Long-term memory: intact
Concentration and Persistence: intact
Intellectual functioning
Average based on fund of knowledge, complexity of concepts, and vocabulary intellectual functioning
Thought Processes
Thought processes: coherent, logical, goal-directed
Pressuring of thoughts: no pressuring
Thought Content
No hallucinations, delusions, suicidal ideation or homicidal ideation
Judgment: unimpaired **Insight:** unimpaired

SUMMARY OF FINDINGS:
This is a 38 year-old pt w/ Bipolar D/O, most recent episode depressed, He is now much less depressed, he has some visual, auditory hallucination. He denies suicidal ideation

4 ATTACHMENT A – [redacted]S VI.A

TEXAS DEPARTMENT OF CRIMINAL JUSTICE

INSTITUTIONAL DIVISION
Jester IV Psychiatric Facility
PSYCHIATRIC EVALUATION

I: Identif[redacted]Data
II: Reason for Referral
III: Chief Complaint
IV: Pertinent Psychiatric History
V: Pertinent Medical History
VI: Pertinent Physical Findings
VII: Mental Status Examination
VIII: Summary of Findings
IX: DSM IV Diagnosis (Axis I-V)
XI: Recommendation/Interventions
XII: Prognosis
XIII: Signature/Date

Inmate Name: Robertson, Ricky **TDCJ-ID: 1172218**
Date of Report: 07/07/04 **D & E Day 7: 7/9/2004**

DSM IV DIAGNOSTIC IMPRESSION:

Axis I:	296.52 Bipolar I Disorder, Most recent episode Depressed, Moderate
	303.9 Alcohol Dependence
	304.8 Polysubstance Dependence
Axis II:	301.7 Antisocial Personality Disorder
	301.7 Antisocial Personality Disorder with Borderline Features
	301.83 Borderline Personality Disorder
	V62.89Borderline Intellectual Functioning
Axis III:	No diagnosis
Axis IV:	Incarceration
Axis V:	70

RECOMMENDATIONS/INTERVENTION:
PULHES: S3NT
HSM 18: I.A I.D III.19, 20, 21, 23, 25, 26, 27 IV.B V.C
Medications: Continue current medications:
Thorazine 150 mg BID
Lithium 9000 mg BID
Cogentin 2 mg BID
Amatadine 100 mg BID
Laboratory: Recommend UA, CBC w/differential & platelets, Chem10, LFT's, TSH, and EKG , Lithium Level on return to unit of assignment.
Disposition: Consider discharge to unit of assignment on completion of D&E

PROGNOSIS WITH TREATMENT:
Fair with regard to Axis I Psychiatric Disorder

SIGNATURE/DATE:

Karl D. Yu, PA-C, Midlevel Practitioner, 07/07/04

University of Texas Medical Branch Correctional Managed Care
Mental Health Services
INDIVIDUAL TREATMENT PLAN (ITP)

B2B-003

NAME: ROBERTSON, RICKY **TDCJ#:** 1172218 **FACILITY:** JESTER IV

	Provider Type	Program		ITP Review Date	Provider Initial
x	Psychiatrist/MLP		Outpatient		
	Psychotherapist/Psychologist		Inpatient		
	Mental Health Liaison/Social Worker		ASICP		
	Occupational Therapist		Step-down		
	Music Therapist				
	Recreational Therapist				

Date ITP Drafted: 7/9/2004 **ITP Closed Date:** _____ (see clinic note for details)

Initial DSM IV Diagnosis

Axis I 298.9
Axis II Deferred
Axis III Deferred
Axis IV Incarceration
Axis V _____

Revised Diagnosis

Revision Date _____
Axis I _____
Axis II _____
Axis III _____
Axis IV _____
Axis V _____

Patient strengths Ambulatory, Verbal

Long-term goal(s) Resolution of Symptoms related to Problem 1

Problem/focus of intervention (1) Symptoms related to Axis I Diagnosis

Date Identified 7/9/2004 Short-term goal Treatment Compliance, Reduction Symptoms r/t Problem 1

Anticipated achievement date Indefinite Actual achievement date _____

Treatment/intervention Psychopharmacotherapy

Problem/focus of intervention (2) _____

Date Identified _____ Short-term goal _____

Anticipated achievement date _____ Actual achievement date _____

Treatment/intervention _____

Problem/focus of intervention (3) _____

Date Identified _____ Short-term goal _____

Anticipated achievement date _____ Actual achievement date _____

Treatment/intervention _____

Provider Name: ~~[ ]~~Daryl Knox,MD, [ ]Karl D. Yu, PA-C, Psychiatry **Title:** [ ] MD, [ ] PA-C

Signature: _____ **Date:** 7/9/2004

B2B-003

Texas Department of Criminal Justice
Mental Health Services
ABNORMAL INVOLUNTARY MOVEMENT SCALE

NAME: ROBERTSON, RICKY
TDCJ #: 1172218
DATE: 7/9/2004

Complete examination procedure outlined in the instructions before making rating. Rate highest severity observed. Movements occurring upon activation rate one less than those occurring spontaneously.
0 = None 1 = Minimal 2 = Mild 3 = Moderate 4 = Severe

1. Muscles of facial expression e.g. movements of forehead, eyebrows, periorbital area, cheeks, include frowning, blinding, smiling, grimacing	0										
2. Lips and perioral area e.g. puckering, pouting, smacking	0										
3. Jaw e.g. biting, clenching, chewing, mouth opening, lateral movement	0										
4. Tongue Rate only increase in movement both in and out of mouth, not inability to sustain movement	0										
5. Upper (arms, wrists, hands, fingers) Include chronic movements (i.e. rapid objectively purposeless, irregular, spontaneous); athetoid movements (i.e. slow, irregular, complex, serpentine). DO NOT include tremor (i.e. repetitive, regular, rhythmic).	0										
6. Lower (legs, knees, ankles, toes) e.g. lateral knee movement, foot tapping, heel dropping, foot squirming, inversion, and eversion of foot	0										
7. Neck shoulders, hips e.g., rocking, twisting, squirming, pelvic gyrations	0										
8. Severity of abnormal movements	0										
9. Incapacitation due to abnormal movements	0										
10. Patient's awareness of abnormal movements Rate only patient's report: No awareness=0 Aware, no distress =1 Aware, mild distress=2 Aware, moderate distress=3 Aware, severe distress=4	0										
11. Current problems with teeth &/or dentures? No=0 Yes=1	0										
12. Does patient usually wear dentures? No=0 Yes=1	0										
Comments:											
Please date and sign on the spaces on the right.											

HSP-15 (FRONT) (REV. 4/02)

[ ] Karl D. Yu, PA-C
[X] Daryl, Knox, MD 7/9/2004

B2B-003

Texas Department of Criminal Justice
Mental Health Services
ABNORMAL INVOLUNTARY MOVEMENT SCALE

NAME: ROBERTSON, RICKY
TDCJ #: 1172218
DATE: 7/9/2004

Complete examination procedure outlined in the instructions before making rating. Rate highest severity observed. Movements occurring upon activation rate one less than those occurring spontaneously.
0 = None 1 = Minimal 2 = Mild 3 = Moderate 4 = Severe

1. Muscles of facial expression e.g. movements of forehead, eyebrows, periorbital area, cheeks, include frowning, blinding, smiling, grimacing	0										
2. Lips and perioral area e.g. puckering, pouting, smacking	0										
3. Jaw e.g. biting, clenching, chewing, mouth opening, lateral movement	0										
4. Tongue Rate only increase in movement both in and out of mouth, not inability to sustain movement	0										
5. Upper (arms, wrists, hands, fingers) Include chronic movements (i.e. rapid objectively purposeless, irregular, spontaneous); athetoid movements (i.e. slow, irregular, complex, serpentine). DO NOT include tremor (i.e. repetitive, regular, rhythmic).	0										
6. Lower (legs, knees, ankles, toes) e.g. lateral knee movement, foot tapping, heel dropping, foot squirming, inversion, and eversion of foot	0										
7. Neck shoulders, hips e.g., rocking, twisting, squirming, pelvic gyrations	0										
8. Severity of abnormal movements	0										
9. Incapacitation due to abnormal movements	0										
10. Patient's awareness of abnormal movements Rate only patient's report: No awareness=0 Aware, no distress =1 Aware, mild distress=2 Aware, moderate distress=3 Aware, severe distress=4	0										
11. Current problems with teeth &/or dentures? No=0 Yes=1	0										
12. Does patient usually wear dentures? No=0 Yes=1	0										
Comments:											
Please date and sign on the spaces on the right.											

HSP-15 (FRONT) (REV. 4/02)

[ ] Karl D. Yu, PA-C
[X] Daryl, Knox, MD 7/9/2004

Name: ROBERTSON, RICKEY
TDCJ No.: 1172218
Unit: J4 B2A-18 ~~B1-48~~

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Date & Time	Notes
6/30/2004	Initial D&E Psychiatric Assessment D&E Day 1 · Therapist: GADBAN/T
1:30	Referring Diagnosis: Seeing spiders after drug charge See CEMR note 6/27/04)
	S: The patient states, "I don't know why they sent me here." "I was seeing spiders then, Not any more." "I am taking Thorazine, Cogentin, Amantadine & Lithium, for Bipolar Manic" "I'm probably depressed now," "I slept 8 hours." "Not very depressed." "yes sir, I'm feeling fine, I don't need you to change my med." "They said I have Bipolar in '85 in Michigan Prison"
	O:
	Mood/Affect: mildly depressed & congruent affect
	Sensorium: clear
	Orientation: x 4
	Thought Processes: ~~C~~/LGD
	Thought Content: ~~HH/D~~/SI/HI
	A: 296.5 Bipolar D/O. MRE depressed
	P: Continue D&E Process
	Cont all current Meds.
	[ ]Daryl K. Knox, MD, [X]Karl Yu, PA-C, Psychiatry

Please sign each entry with status
HSM – 1 (Rev - 5/92)

6/30/04

UTMB MANAGED CARE
CID NEWLY ASSIGNED PATIENT CHART REVIEW

NAME: Robertson Reeley TDCJ#: 1172218
FACILITY: LV DATE: 6·28·04
DOB: 8/21/66 AGE: 37 SEX: M
ALLERGIES: NKA

Current TB Class 0

PPD current: *(If no mark Plan line 1)*		Currently on TB CPX or TB Therapy: *(If yes mark Plan line 11,12,13)*		Yes / No
	✓ Yes			INH (Isoniazid)
	No			RIF (Rifampin)
	N/A			PZA (Pyrazinamide)
				(EMB) Ethambutol
				B6
				Other:

Length of Prior CPX *(If CPX is less 6 months, mark Plan line 14)*		
Last CXR date *(If Class 2,3, or 4 and no CXR in TDCJ during current incarceration mark Plan line 2)*		
Last Tetanus/due date *(If greater than 10 years, mark Plan line 3)*		
Date of last flu vaccine	✓	Not Applicable *(Refer to Policy B-14.3)*
Date of last pneumonia vaccine	✓	Not Applicable *(Refer to Policy B-14.3)*
Positive Hepatitis B hx/vaccination: *(If no, mark Plan line 4A)*		Yes
	✓	No
		Refused
If currently receiving the HBV vaccination, next due: *(If receiving mark Plan line 4B)*		
Varicella history documented in chart: *(If no, mark Plan line 8)*	✓	Yes
		No
Last PE offered: 6/30/03 Due: *(If yes mark Plan line 5; refer to policy E 34.2)*		Yes
	✓	No

RPR: *(If no mark Plan line 9)*	✓	Yes	RPR result:	Reactive
		No		✓ Non-Reactive
		Refused		
Previous HIV testing: *(If not tested, mark Plan line 10)*				Yes
	✓			No
				Refused

FEMALE ONLY

Pap pelvic current: *(If no, mark Plan line 6A; refer policy E34.2)*		Yes	Mammogram referral needed: *(If yes, mark Plan line 6B; refer to Policy E 34.2)*	Yes
		No		No
		Not Applicable		Not Applicable

PREGNANT FEMALE

HCV status: *(If none mark Plan line 7A)*
HbsAG status: *(If none, mark Plan line 7B)*

6/28/04

MEDIC[illegible] & MENTAL HEALTH TRANSFER [illegible]REENING

NAME: Roberson, L TDCJ: 1172216 ALLERGIES: NKDA

III. Facility of Assignment Health Screening: Date:_____ Time:_____ Facility:_____

Current History of treatment for Health Problem or Chronic Condition? MEDICAL ☐ DENTAL ☐ MENTAL HEALTH ☐ SUBSTANCE ABUSE ☐

If yes, describe:_____

Currently taking any medications: Yes ☐ No ☐ PRINT PASS ATTACHED: Yes ☐ No ☐
Direct Observed Therapy? Yes ☐ No ☐ Keep On Person? Yes ☐ No ☐
Do you have a current health care complaint? MEDICAL ☐ DENTAL ☐ MENTAL HEALTH ☐

If yes, describe:_____

GENERAL APPEARANCE: Clean ☐ Dirty ☐ Neat ☐ Sloppy ☐
SKIN: Cuts: Yes ☐ No ☐ Bruises: Yes ☐ No ☐ Sores: Yes ☐ No ☐
PHYSICAL DEFORMITIES: Yes ☐ No ☐

If yes, describe:_____

OFFENDER'S PRESENT ORIENTATION: What is today's date?_____ Time?_____
What place is this?_____

SPEECH: ☐ Fluent ☐ Mumbling ☐ Shouting ☐ Refuses to Talk ☐ Other:_____

BEHAVIOR: ☐ Angry ☐ Crying ☐ Cooperative ☐ Happy ☐ Other:_____
DO YOU HAVE CURRENT THOUGHTS ABOUT SUICIDE? Yes ☐ No ☐
HAVE YOU EVER TRIED TO KILL YOURSELF? Yes ☐ No ☐

OFFENDER SIGNATURE:_____ **DATE:**_____

SCREENER SIGNATURE:_____ **DATE:**_____

IV. **Review of Offender' Health Record**

Date last PPD ☑ / CXR ☐ : 6/29/1038 mm **X-rays Rec'd: YES ☐ NO ☑ Meds Rec'd: YES ☐ NO ☑ DOT: YES ☐ NO ☐**

Health Problems: Vision - Psych

Meds:

HCTZ	Rec'd ☐	Exp'd ☐	MD Reorder____
Cogentin	Rec'd ☐	Exp'd ☐	MD Reorder____
Promethazine	Rec'd ☐	Exp'd ☐	MD Reorder____
CPAP	Rec'd ☐	Exp'd ☐	MD Reorder____
	Rec'd ☐	Exp'd ☐	MD Reorder____
	Rec'd ☐	Exp'd ☐	MD Reorder____
	Rec'd ☐	Exp'd ☐	MD Reorder____
	Rec'd ☐	Exp'd ☐	MD Reorder____
	Rec'd ☐	Exp'd ☐	MD Reorder____
	Rec'd ☐	Exp'd ☐	MD Reorder____

(no meds Received)

Treatments: Special Care Follow-up. Diets. Appointments:

Add to Chronic Clinic: ☑ Yes ☐ No Chart for review to: CID ☑

DISPOSITION OF OFFENDER:

No health care needs or immediate referrals to medical necessary ☐
Referral to Medical: Routine Follow-up ☑ Emergency Medical Services ☐
Referral to Mental Health: Routine Follow-up ☑ Emergency Mental Health Services ☐
Referral to Dental: Routine Follow-up ☑ Emergency Dental Services ☐
RELEASE TO GENERAL POPULATION: ☐ Yes ☑ No
Restrictions: Housing Lower Only
Work (Hrs): 19-20-21 Discipline Restrictions: Yes ☐ No ☑

Nurse Signature Date Time Gutierrez 6/28/04 0045
Physician Physician Extender Signature Date Time L.M. Largent M.D. 6/28/04

HSN-1 ACA-Pilot Draft 3 2002) To Remain in Offender's Health Record

MEDICAL[illegible]\RANCE FOR MENTAL HEALTH T[illegible]SFERS

DATE 6/27/04 TIME 1545 REFERRING UNIT RL RECEIVING UNIT J4

OFFENDER NAME Robertson, Ricky L TDCJ # 1172218 AGE/DOB 8/21/66 37

ALLERGIES NKDA ILLNESSES Bipolar D/O - Manic

INJURIES None PULHES: P____ U____ L____ H____ E____ S 3NT

VITAL SIGNS:		CURRENT MEDICATIONS:
6/27/04	WT 226	Lithium 900 BID
	TEMP 98.2	Thorazine 100 BID
	PULSE 94	Cogentin 2 BID
	RESP 18	Amantadine 100 BID
	BP 133/82	

PHYSICAL OBSERVATIONS: (CIRCLE APPROPRIATE RESPONSE)

SKIN		GYNECOLOGICAL	
1. TURGOR	(GOOD) / POOR	1. PREGNANT	YES / NO / ~~NA~~
2. LACERATIONS	YES / (NO)	2. MENSTRUATING	YES / NO / NA
3. CONTUSIONS	YES / (NO)		
4. BRUISES	YES / (NO)		
RESPIRATORY		NEUROLOGICAL	
1. BREATH SOUNDS	(CLEAR) / WHEEZING	1. HEADACHE/DIZZINESS	YES / (NO)
2. DYSPNEA	YES / (NO)	2. SPEECH	(NORMAL) / SLURRED
3. COUGH/CONGESTION	YES / (NO)	3. PUPILS	(EQUAL) / UNEQUAL
		4. GAIT	(NORMAL) / ABNORMAL
CARDIOVASCULAR		COGNITIVE	
1. RHYTHM	(REGULAR) / IRREGULAR	1. ORIENTATION	(PERSON) / (PLACE) / (TIME)
2. EDEMA	YES / (NO)	2. COHERENCE	(ORGANIZED) / ILLOGICAL
3. CHEST PAIN	YES / (NO)	3. EMOTIONS	(SOCIAL) / WITHDRAWN
4. BLEEDING TENDENCIES	YES / (NO)		AGITATED / (LISTLESS)
			HOSTILE / (COOPERATIVE)
GASTROINTESTINAL		GENITOURINARY	
1. DISTENTION	YES / (NO)	1. FLANK PAIN	YES / (NO)
2. CONSTIPATION/DIARRHEA	YES / (NO)	2. BURNING/FREQUENCY	YES / (NO)
3. NAUSEA/VOMITING	YES / (NO)	3. DISCHARGE	YES / (NO)
4. ABDOMINAL PAIN	YES / (NO)		

EXAMINER SIGNATURE [signature] TITLE [signature]

DISPOSITION:

☑ MEDICALLY CLEARED FOR TRANSPORT TO INPATIENT/CRISIS MANAGEMENT FACILITY

NAME OF PHYSICIAN/MLP M. Domiz PAC / Amata PA

SIGNATURE (OR CO-SIGNATURE IF V.O. OR T.O.)_____

B2B-003

1

TEXAS DEPARTMENT OF CRIMINAL JUSTICE

DIVISION INSTITUTIONAL
Jester IV Psychiatric Facility

PSYCHOSOCIAL EVALUATION

INMATE NAME: Robertson, Ricky **TDCJ#: 1172218**

IDENTIFYING DATA:

Patient Name: Robertson, Ricky
TDCJ#: 1172218
Age: 47
Race: Caucasian
Date of Referral to JIV CM: 6/28/04
DOA to D&E: 6/30/04
Examiner: H. Gadban, MA, LPA, LPC

REASON FOR REFERRAL:

Robertson was received on Jester IV by way of referral from Lopez unit on 6/28/04. Reason for referral was presented as presentation of agitated behavior and complaints of visual hallucination. He also verbalized that at his unit he did not want to be around other people. Following his initial review by the Crisis Management treatment team he was referred to D&E and was voluntarily admitted on 6/30/04.

This psychosocial evaluation was completed in accordance with MHS Policy and Procedure D-2.1. The purpose of this evaluation was to assess the patient's current mental functioning and to make recommendation for further treatment as appropriate. The patient was informed that this report would be placed in his mental health record and he gave his verbal consent.

CHIEF COMPLAINTS:

Robertson was asked to summarize his principle problem that could be a focus of needed help and he stated, "I've been diagnosed with bipolar manic since 86. I'd rather have a cell by myself. I did not get along with two people at that unit."

PERTINENT MENTAL HEALTH HISTORY:

Robertson stated that he was first diagnosed with Bipolar Disorder during his incarceration at Riverside Correctional Facility in Ionia, Michigan. He stated he was placed on Navane for a brief period of time and then was prescribed Levbid. He stated following his release from that unit he was supposed to continue psychiatric treatment in the freeworld but he discontinued his medication and did not seek further help. Since

TEXAS DEPARTMENT OF CRIMINAL JUSTICE

DIVISION INSTITUTIONAL
Jester IV Psychiatric Facility

PSYCHOSOCIAL EVALUATION

his admission to TDCJ he was seen on outpatient basis and was prescribed the following medications; Symmetrel 100mg., Cogentin 2mg., Thorazine 50mg. and Lithium 900mg.

PERTINENT SOCIAL HISTORY:

Robertson was born on 8/21/1966 in Lafayette, Indiana. He was born to an intact family that consisted of both biological parents and one younger brother. He stated at age two his parents were divorced. When asked about reason for divorce he stated his mother told him his father was a difficult husband. He stated his father was never part of his upbringing and he has never seen him since he left the family. Family psychiatric history was negative. Family medical history reflects his mother is epileptic and currently receives some disability checks. Family drug history was positive for alcohol as he stated his maternal uncle died of alcoholism and his father also had a history of alcohol abuse. Family suicidal history was negative. Personal history reflects he is currently divorced after having been married for five years at the age of 28. He stated he has fathered one daughter who is currently 18-years-old and lives on her own. He stated reason for his divorce was his dislike for medication and dislike for socialization with his wife's family. Personal medical history reflects no active medical problem other than visual deficits. Occupationally he stated he worked for himself for eight years selling food and beverages. He also stated he worked for two years in the construction business. Educationally he reported completing the 12th grade in Michigan and TDCJ record reflects his IQ to be 89. Drug history was positive for daily abuse of alcohol as well as experimenting with cocaine on a limited basis. Past history was negative for any form of physical, emotional or sexual abuse. Past history was also negative for any past suicidal attempts. Criminal history reflects he is currently serving a three-year-sentence, which began on 5/23/03 with a projected release date of 9/2/04, and maximum release date of 5/22/06. His crime was Deadly Conduct whereby he threatened to stab a 38-year-old Black male bus driver with a 19-in. sword in a case. He currently has four minor cases and he is a trustee Line Class S3.

MENTAL STATUS EXAMINATION:

Ricky was reluctantly escorted to the dayroom. He is a 37-year-old Caucasian male who stands 6 ft. 5 in. and weighs approximately 227 lbs. His statue was upright and his gait was steady and slow. Attitude and mannerism reflect a polite and cooperative individual. His eye contact was direct and fairly maintained. His speech was soft and at a low volume. His mood was apathetic and his affect was congruent. When asked to rate his feelings on a scale of 1 – 10 with 10 being the best he stated he felt about 5.

TEXAS DEPARTMENT OF CRIMINAL JUSTICE

DIVISION INSTITUTIONAL
Jester IV Psychiatric Facility

PSYCHOSOCIAL EVALUATION

INMATE NAME: Robertson, Ricky **TDCJ#: 1172218**

He denied any active thoughts or plans to harm himself or others but admitted to recent homicidal thoughts without any plans. He reported that he sleeps too much, averaging between 8 – 10 hours a day. He stated his appetite is good and his energy level is low as he states, "I am slow to wake up and start up." Thought flow was organized, coherent and goal directed without any looseness of association or tangential thinking. Thought content did not reflect any active perceptual disturbance at the present time. He admitted to one or two cases of experiencing auditory hallucination in the past. Also, in the recent past, he stated he has experienced visual hallucination of spiders that at times he attempts to step on without finding any. Thought content did not reflect any form of delusional thinking, special preoccupation or obsessive rumination. Cognitively he was oriented to person but not to place or exact time. Recent memory was poor as he recalled only 1:3 objects of 5 minutes delay. Long term memory was fair as he was able to name 3:4 preceding presidents but not in the exact order. Calculation and concentration was good as he completed the Serial 7s and easily spelled the word world backward correctly. Abstract reasoning was poor as he interpreted the proverb about green grass by stating, "It will be better later." As for the proverb about iron he stated, "I've never heard that before." Judgment was poor by history and limited by testing as when asked what would you do if you found a sealed stamped and addressed envelope he stated, "Put it in the mailbox." As for noticing smoke and fire in a theater he stated, "I would look for the fire extinguisher and then look for help and try to locate the manager." Insight into his problem is fair. Overall intellectual functioning appears to be within the normal range.

RESULTS OF PSYCHOMETRICS:

Ricky Robertson was administered the PAI. Test results reflect a validity scale with Elevated Negative Impression at a T-score of 96. Given this level of elevation one raised a question about potential distortion. Elevation on the clinic scales was high to Alcohol followed by Schizophrenia, Antisocial and Anxiety Related Disorder. It is important to note that elevation on Schizophrenia does not appear to be consistent with his clinical presentation in the absence of auditory hallucination and delusional thinking. This elevation possibly could be attributed to his desire for social detachment and to be isolated. His anxiety related disorder likewise is also consistent with his clinical presentation as he denied any past traumatic distress. In summary, the PAI reflects an exaggerated clinical picture and inaccurate representation of one's current problems.

TEXAS DEPARTMENT OF CRIMINAL JUSTICE

DIVISION INSTITUTIONAL
Jester IV Psychiatric Facility

PSYCHOSOCIAL EVALUATION

INMATE NAME: Robertson, Ricky **TDCJ#: 1172218**

SUMMARY OF FINDINGS:

Robertson was seen this morning for clinical interview, mental status examination and psychometrics. He stated his principle problem appears to be his desire to be in a single cell and not to be housed in a dorm like setting. He stated he was first diagnosed with Bipolar Disorder while incarcerated in Michigan but his descriptive symptom does not validate enough symptomology to justify such diagnosis. Given his description that in the past he has mostly experienced feelings of being down but was able to function presented the possibility of a different diagnosis.

DSM IV DIAGNOSTIC IMPRESSION:

Axis I:	300.4 Dysthymic Disorder
	H/O 296.40 Bipolar I Disorder
	303.90 Alcohol Dependence by History
Axis II:	301.90 Personality Disorder NOS
Axis III:	No Active Medical Problem
Axis IV:	Moderate, Incarceration
Axis V:	Current GAF = 55

RECOMMENDATIONS/INTERVENTIONS:

It is recommended for Robertson to be seen by the attending psychiatrist to evaluate his current status and to adjust his medication accordingly. On day 7 he should be considered for discharge to his unit of assignment, as it appears to be the least restrictive condition for further care.

SIGNATURE/DATE:

7/8/04

H. Gadban, MA, LPA, LPC Date
B1 Pod – D&E Program
Jester IV Psychiatric Facility

HG/lmg dd: 06/30/04 dt: 07/07/04

Bz - A-18

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Ricky Robertson
TDCJ No.: 1172218
Unit: J-4

Date & Time	Notes
6-30-04	Initial D and E Assessment: Patient consented to D and E evaluation x 7 working days.
13:50	Patient read and signed the Consent to Mental Health Treatment form. Limits of Confidentiality were explained. Patient signed the Release of Information form for freeworld/family contacts.
	Informed Consent: Patient informed of assessment plan, risks/benefits, and alternatives to assessment. Patient understands that participation is voluntary and may be discontinued at any time. S&O: Seen this dm for 1st day of D&E → psychosocial evaluation. He is 37 y/o Caucasian male who appears older than his age. He reluctantly agreed to talk stating he had a headache. Chief complaints "I have been diagnosed Bipolar Disorder w/ mania since 1986 & I'd rather be in a cell by myself." Mood euthymic rated by him at 5/10 w/o agitation. c/o plans for self harm. No hopelessness voiced. Sleep reported to be excessive, w/ good appetite → low energy. C/o 2 cases of waterfullness reported experienced in the past but does not reflect mania. Thought were directed and organized. No active AH reported. Some recent VH reported. No delusions reported. Cognitively he was oriented x 4 w/ good calculation, poor abstraction → limited judgment IQ was at the normal range. PAI reflected distortion (Nim = 96)
	A-I 300.4 Dysthymic Disorder H/s of Bipolar Disorde / 303.90 Alcohol Dependence
	P- Recommend review from the attending and Dr to work on dx. I given the absence of imminent danger to self or others.
	[signature] LPC LPHA

Please sign each entry with status.

SM - 1 (Rev. 5/92)

B2B03

CLINIC NOTES

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Robertson, Rickey.
TDCJ No.: 1172218
Unit: J4

Date & Time	Notes
6-28-04 730	S/O: Seen the pt in the Seclusion cell for the progress Check. Pt is alert Oriented x3. Communicate a good eye-Contact. Pt denies any S/H ideation at this time. A: Calm. Pt will Continue monitor & follow up. A Abraham RN

Please sign each entry with status.

HSM - 1 (Rev. 5/92)

B2B03

TEXAS DEPARTMENT OF CRIMINAL JUSTICE - HEALTH SERVICES
MENTAL HEALTH OBSERVATION CHECKLIST

NAME: Robertson, Micky TDCJ# 1122?? UNIT: ?? DATE & TIME OF ADMISSION: 6/28/04

CHECK THE APPROPRIATE TYPE:

✓ CRISIS MANAGEMENT ___ MENTAL HEALTH OBSERVATION B(A S) Housing

___ SECLUSION ___ RESTRAINT

TODAY'S DATE: 6/28/04 0045

ITEMS ALLOWED: (Check appropriate box(es))

___ CLOTHING ___ REGULAR TRAY ✓ SUICIDE BLANKET

___ UNDERGARMENTS ONLY ___ PAPER TRAY ___ WOOL BLANKET

___ MATTRESS ✓ SACK LUNCH ___ GOWN

See Shart [illegible]

CODE EXPLANATION

Code	Explanation
1	Beating on door/wall
2	Yelling, screaming
3	Crying
4	Laughing
5	Singing
6	Mumbling
7	Talking to self
8	Talking to others
9	Standing still
10	Walking
11	Sitting or lying
12	Quiet
13	Sleeping
14	Meals/fluids
15	Bath/shower
16	Toilet
17	Restraints loosened
18	Range of motion
19	Out-of-cell
20	Nurse
21	Meds

Printed Name	Initials
[illegible]	[illegible]
Sanders	[illegible]
[illegible]	[illegible]
[illegible]	[illegible]
[illegible]	[illegible]
[illegible]	[illegible]

TIME OF VISUAL CHECK

Time	CODE/INITIALS	Time	CODE/INITIALS	Time	CODE/INITIALS
0000		0800	11 TH	1600	R-16 TH
0015		0815	11 TH	1615	11 TH
0030		0830	11 TH	1630	11 TH
0045	20A	0845	11 TH	1645	11 TH
0100	11 [illegible]	0900	11 TH	1700	11 TH
0115	11 [illegible]	0915	R-15 TH	1715	11 TH
0130	11 [illegible]	0930	R-16 TH	1730	11 TH
0145	11 [illegible]	0945	11 TH	1745	11 [illegible]
0200	11 [illegible]	1000	[illegible] TH	1800	11 [illegible]
0215	11 [illegible]	1015	11 [illegible]	1815	11 [illegible]
0230	11 [illegible]	1030	11 TH	1830	11 [illegible]
0245	11 [illegible]	1045	11 TH	1845	11 [illegible]
0300	11 [illegible]	1100	11 TH	1900	11 [illegible]
0315	11 [illegible]	1115	11 TH	1915	11 [illegible]
0330	11 [illegible]	1130	11 TH	1930	11 [illegible]
0345	11 [illegible]	1145	R-14 TH	1945	11 [illegible]
0400	11 [illegible]	1200	11 TH	2000	11 [illegible]
0415	11 [illegible]	1215	11 TH	2015	11 [illegible]
0430	11 [illegible]	1230	R-16 TH	2030	11 [illegible]
0445	11 [illegible]	1245	11 TH	2045	11 [illegible]
0500	11 [illegible]	1300	11 TH	2100	11 [illegible]
0515	11 [illegible]	1315	11 TH	2115	11 [illegible]
0530	11 [illegible]	1330	11 TH	2130	11 [illegible]
0545	11 TH	1345	11 TH	2145	11 [illegible]
0600	11 TH	1400	11 TH	2200	11 [illegible]
0615	R-14 TH	1415	11 TH	2215	11 [illegible]
0630	11 TH	1430	11 TH	2230	11 [illegible]
0645	11 TH	1445	11 TH	2245	11 [illegible]
0700	R-21 TH	1500	11 TH	2300	11 [illegible]
0715	11 TH	1515	11 TH	2315	11 [illegible]
0730	R-16 TH	1530	14 TH	2330	11 [illegible]
0745	11 TH	1545	11 TH	2345	11 [illegible]

HSP-5 (Rev. 1-03)

... JUSTICE ... HEALTH SERVICES
MENTAL HEALTH OBSERVATION CHECKLIST

NAME: Koteteon Galberg TDCJ# 1172218 UNIT: Jester IV DATE & TIME OF ADMISSION: 6/29/18

CHECK THE APPROPRIATE TYPE:

___ D&E

___ CRISIS MANAGEMENT ___ MENTAL HEALTH OBSERVATION ___ SUICIDE PRECAUTION

___ SECLUSION ___ RESTRAINT ------ASSAULT PRECAUTION

TODAY'S DATE: 6/30/04

ITEMS ALLOWED: (Check appropriate box(es))

___ CLOTHING ___ REGULAR TRAY ___ SUICIDE BLANKET

___ UNDERGARMENTS ONLY ___ PAPER TRAY ___ WOOL BLANKET

___ MATTRESS ___ SACK LUNCH ___ GOWN

PLEASE CHECK SHORT TAG

CODE EXPLANATION

1 Beating on door/wall
2 Yelling, screaming
3 Crying
4 Laughing
5 Singing
6 Mumbling
7 Talking to self
8 Talking to others
9 Standing still
10 Walking
11 Sitting or lying
12 Quiet
13 Sleeping
14 Meals/fluids
15 Bath/shower
16 Toilet
17 Restraints loosened
18 Range of motion
19 Out-of-cell
20 ___
21 ___

Printed Name	Initials
E. AeSoh	ET
R. Johnson	RJ
McKnight	Km

TIME OF VISUAL CHECK

Time	CODE/INITIALS	Time	CODE/INITIALS	Time	CODE/INITIALS
0000	11 ET	0800	11 Km	1600	
0015	11 ET	0815	Km 11	1615	
0030	11 ET	0830	Km 11	1630	
0045	11 ET	0845	11 Km	1645	
0100	11 ET	0900	Km 11	1700	
0115	11 ET	0915		1715	
0130	11 ET	0930		1730	
0145	11 ET	0945		1745	
0200	11 ET	1000		1800	
0215	11 ET	1015		1815	
0230	11 ET	1030		1830	
0245	11 ET	1045		1845	
0300	11 ET	1100		1900	
0315	11 ET	1115		1915	
0330	11 ET	1130		1930	
0345	11 ET	1145		1945	
0400	11 ET	1200		2000	
0415	11 RJ	1215		2015	
0430	11 RJ	1230		2030	
0445	11 RJ	1245		2045	
0500	11 RJ	1300		2100	
0515	11 RJ	1315		2115	
0530	11 RJ	1330		2130	
0545	Km 11	1345		2145	
0600	Km 11	1400		2200	
0615	Km 11	1415		2215	
0630	Km 11	1430		2230	
0645	11 Km	1445		2245	
0700	Km 11	1500		2300	
0715	11 Km	1515		2315	
0730	Km 11	1530		2330	
0745	11 Km	1545		2345	

HSP-S (Rev. 1/03)

...ALTH SERVICES

...ENTAL HEALTH OBSERVATIO ...HECKLIST

NAME: Roberson, R. TDCJ# 1172218 UNIT: Jester IV DATE & TIME OF ADMISSION: 1

CHECK THE APPROPRIATE TYPE:

___ CRISIS MANAGEMENT ___ MENTAL HEALTH OBSERVATION ___ D&E

___ SECLUSION ___ RESTRAINT ___ SUICIDE PRECAUTION

TODAY'S DATE: 6/29/14 ------ASSAULT PRECAUTION

ITEMS ALLOWED: (Check appropriate box(es)

___ CLOTHING	___ REGULAR TRAY	___ SUICIDE BLANKET
___ UNDERGARMENTS ONLY	___ PAPER TRAY	___ WOOL BLANKET
___ MATTRESS	___ SACK LUNCH	___ GOWN

PLEASE CHECK SHORT TAG

CODE EXPLANATION

1 Beating on door/wall
2 Yelling, screaming
3 Crying
4 Laughing
5 Singing
6 Mumbling
7 Talking to self
8 Talking to others
9 Standing still
10 Walking
11 Sitting or lying
12 Quiet
13 Sleeping
14 Meals/fluids
15 Bath/shower
16 Toilet
17 Restraints loosened
18 Range of motion
19 Out-of-cell
20 naked
21 shower ref

TIME OF VISUAL CHECK

CODE/INITIALS		CODE/INITIALS		CODE/INITIALS	
0000	9 SD	0800	11 B	1600	11 B
0015	9 SD	0815	11 B	1615	11 B
0030	9 SD	0830	11,2 B	1630	11 B
0045	9 SD	0845	11,2 B	1645	11 B
0100	9 SD	0900	11 B	1700	11 B
0115	9 SD	0915	11 B	1715	11 B
0130	9 SD	0930	11 B	1730	11 B
0145	9 SD	0945	6, 11 B	1745	9
0200	9 SD	1000	11 B	1800	9
0215	11 SD	1015	11 B	1815	9
0230	11 SD	1030	11 B	1830	9
0245	11 SD	1045	11 B	1845	9
0300	11 SD	1100	10 B	1900	9
0315	11 SD	1115	14, 8 B	1915	9
0330	11 SD	1130	8, 9 B	1930	9
0345	11 SD	1145	8 B	1945	9
0400	11 SD	1200	9 B	2000	9
0415	3 SD	1215	9 B	2015	11 CS
0430	3 SD	1230	9 B	2030	11 CS
0445	3 SD	1245	9 B	2045	11 CS
0500	3 SD	1300	7 11 B	2100	11 CS
0515	3 SD	1315	7 11 B	2115	11 CS
0530	3 SD	1330	11 B	2130	11 CS
0545	21 B	1345	11 B	2145	11 CS
0600	11 B	1400	11 B	2200	11 CS
0615	11 B	1415	11 B	2215	11 CS
0630	11 B	1430	11 B	2230	11 CS
0645	11 B	1445	11 B	2245	11 CS
0700	11 B	1500	11 B	2300	11 CS
0715	11 B	1515	11 B	2315	11 CS
0730	20 B	1530	11 B	2330	11 CS
0745	11 B	1545	14 B	2345	11 CS

Printed Name	Initials
S. Dick	SD
B. Bell	BB

TDC-S (Rev. 1-03)

UTMB MENTAL HEALTH SERVICES
CRISIS MANAGEMENT DISCHARGE SUMMARY

NAME Robertson, Ricky TDCJ # 1172218 UNIT J-4

PRIOR C/M ADMISSIONS ____ # PRIOR INPATIENT ADMISSIONS ____ DATE OF LAST ADMISSION ____

ADMISSION DATE 6/28/04 UNIT OF ORIGIN RL DISCHARGE DATE 6/29/04

REASON FOR ADMISSION Bizarre Behaviors

PRESENTING SYMPTOMS & COURSE OF STAY Psychotic / Decompensated
Crisis Intervention Counseling x 2 days

CURRENT MENTAL STATUS & RISK ASSESSMENT A. Disoriented.
Poor ADLs. LOA. Delusional / Paranoid

DIAGNOSTIC IMPRESSION AXIS I 298.9 Psychotic D/O, NOS

AXIS II

RECOMMENDATIONS/PLAN:

☐ ADMIT TO INPATIENT CARE

☑ INITIATE/CONTINUE OUTPATIENT CARE (SPECIFY) Refer to OTP

☐ OTHER (SPECIFY) ____

☑ CONSULTATION WITH RECEIVING FACILITY MENTAL HEALTH OR MEDICAL STAFF CONDUCTED WITH (NAME) Ms LaPointe

DM Tyler PhD RP — CRISIS MANAGEMENT PSYCHOTHERAPIST SIGNATURE

6/29/04 — DATE

ADDITIONAL COMMENTS:

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Robertson, Ricky
TDCJ No.: 1172218
Unit: J-4

Date & Time	Notes
6/28/04 1400	Crisis Management Initial Mental Health Assessment: Patient consented to crisis intervention counseling X three days. Patient read and received a copy of the Limits of Confidentiality Form. The Limits of Confidentiality were explained. Patient informed of treatment plan, risks/benefits, and alternatives to treatment. Patient understands that participation is voluntary and may be discontinued at any time. CM Day #1 (S) "Single, Wednesday, Friday. Unit J, Lopez. Satellites talk to me." (O) Alert. ↓ eye contact. Rambling. Disoriented. ↓ LOA. Paranoid thinking. Delusional. Slightly pressured speech. Poor ADLs. Visual hallucinations but can't tell what they are. Rx noncompliant? (A) Psychotic R/O 298.9 (P) CM Protocol. Suicide Precautions. May have suicide blanket, paper gown + sack meals. Will see tomorrow. ——— DTyler PhD, RP
6/29/04 1000	CM Day #2 Pt. referred to D+E. Discharge summary completed. ——— DTyler, PhD, RP

Please sign each entry with status.

HSM - 1 (Rev. 5/92)

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Robertson, Ricky
TDCJ No.: 1172216
Unit: JIV PSYCHIATRIC FACILITY

Date & Time	Notes
6/28/04 0045	PSYCHIATRIC NURSING ADMISSION ASSESSMENT MODE OF ARRIVAL: Ambulatory SENDING UNIT: RC DOB: 8-21-66 DURATION OF STAY: CM 3 days Reason for Referral: V-H Referring Diagnosis: Chief Complaints: Eval - Psychosis, Don't Know last couple of days meds not working T 97 P 98 R 20 BP 137/67 WT 220 HT 6'5" AIMS Score NA CM Physical Complaints: Chronic Illnesses or Injuries: None Vision - Psych Current Medications: Licoz CPZ Cogentin Amantadine Medication Allergies: NKDA Orientation: Time / Place — Person — Behavioral Responses (circle) agitated, alert, tense, sad, euphoric, worried, happy, angry, suspicious, depressed, anxious Seems Very Preoccupied Hallucinations (explain) Does Hear Some Times - Cannot describe Suicidal / Homicidal (explain) Denies Delusions (explain) Not able to assess @ How to respond to Questions Reason for Admission explained Yes Accesss to Medical Care explained Yes Duration explained Yes Patient's response Yes Maam Treatments (describe) None Items allowed SBlanket - Jonnies - Paper Gown Signature [signature] Date 6/28/04 Time 0045

Please sign each entry with status.

HSM - 1 (Rev. 5/92)

CORRECTIONAL MANAGED CARE
NURSING ASSESSMENT PROTOCOL FOR
PSYCHIATRIC SYMPTOMS

Patient Name: ROBERTSON, RICKY L TDCJ#: 1172218 Date: 06/27/2004 16:46 Facility: LOPEZ

Procedures Ordered:
NURSING LEVEL1 COMPLETE VISIT: np - psychiatric symptoms
NURSING PATIENT EDUCATION: np - psychiatric symptoms

Electronically Signed by MATA, IDOLISA R.N. on 06/27/2004.
##And No Others##

CLINIC NOTES
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION

Name: Roberson, Ricky
TDCJ No.: 1172216
Unit: Ram

Date & Time	Notes
7-13-04 14:45	Sec'l Lear for progress check states he is doing fine — no longer is depressed He continues to prefer to stay in his cell & decline recreation He showers regularly S. No Acute Distress O. Cont to follow up
7-14-04	Pt Cleared to TA c meds. PCA 2 EE

Please sign each entry with status.

HSM - 1 (Rev. 5/92)

9116

HOSPITAL GALVESTON DEATH SUMMARY

ROBERTSON, RICKY
TDCJ-ID#: 1172218

DATE OF BIRTH: 08/21/1966
UH#: 70-83-20-Q

DATE OF INCARCERATION: 06/25/03.

LAST UTMB ADMISSION: 07/16/04.

DATE AND HOUR OF DEATH: 07/16/04 at 15:10:00.

PAST MEDICAL HISTORY: Bipolar disorder, borderline personality disorder, polysubstance abuse.

TERMINAL EVENT: The decedent was a 39-year-old white male who presented to the emergency department after being found unresponsive in his cell. The patient received intubation for hypoxemia and experienced hypotension and was administered dopamine and Levophed. A head CAT scan was negative for intracranial hemorrhage or skull fractures. The patient's death was pronounced at 15:10:00 on 07/16/04.

AUTOPSY REPORT: Not applicable.

CAUSE OF DEATH: Drug overdose versus sepsis versus meningitis.

Roger D Soloway

ROGER D. SOLOWAY, MD

RDS/MEDQ J#: 237852 D: 08/16/2004 21:09:12 T: 08/17/2004 13:31:42

Original

9.471

01/12/2005 09:35 9364376692 ARCHIVES PAGE 02

Scanned by GRINDELE, DIANA CCA in facility DARRINGTON on 07/27/2004 10:50

EMERGENCY RECORD

FACILITY: ER NUMBER: 04 DA 0516

Robertson, Ricky — Last Name / First Name / MI

Date: 7/15/04 Time: 2330

MODE OF ARRIVAL: ☐Ambulatory ☐W/C ☐Stretcher ☒Carried

Condition: ☐Stable ☐Guarded ☐Serious ☒Critical

Allergies: NKA

Age: 37 DOB: 8/21/66 ☒Male ☐Female

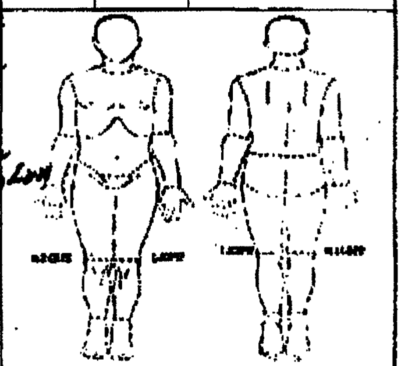
TDCJ#: 1172812

Chief Complaint/Location/Onset: Unresponsive, empty stare, Axilla Temp - 108

TIME	TEMP	PULSE	RESP	B/P	OTHER (O2 Sat, Cardiac Monitor, glucose, etc.)
2210	108.°	100	32	98/70	
2255	105.9				O2 SAT 78%
2330	104.2		74	90/50	
2345	103.6	100	74	90/[illegible]	

Current Medications:	Dose	Freq	Last Dose
Lithium Carbonate	300mg	BID	
Chlorpromazine	100mg	BID	
Benztropine Mes	2mg	BID	
Trazodone	100mg	BID	
Nitroglycerin 7			

NURSE ASSESSMENT: Pt unresponsive, body [illegible] hot to touch, Pt has myclonic breathing. Finger stick - 283, was found in cell slumped [illegible]



Triage Nurse Signature: [signature] LVN / [signature] LVN

SIGNIFICANT MEDICAL HISTORY: Mental Ill, Bipolar [illegible]

PHYSICAL: UNCONSCIOUS W/ NO RESPONSE TO PAIN & [illegible] HAS A GLASSY STARE, SKIN HOT TO THE TOUCH. NO RESPONSE TO VERBAL & PT PACKED W/ ICE, IV NACL [illegible] X 2 - R HAND & ARM, [illegible] VIA AMBU BAG. UNSUCCESSFUL INTUBATION BY PARAMEDICS.

DIAGNOSIS/IMPRESSION: R/O HEAT STROKE

PROVIDERS ORDERS: Notified: [illegible] Time: 2200
SEND TO NEAREST HOSPITAL PARAMEDICS CALLED LIFE-FLIGHT
V.O. Mc Abraham [signature] LVN

Time	Medication/Solution	Dose /Rate	Site Route	Gauge	Amount Infused	Signature
1900	NACL	W. OPEN	R HAND	20G	300CC	[signature] LVN
2300	NACL	W. OPEN	L ARM	16G	200CC	[signature] LVN

Disposition of Patient: ☐Local ER ☐Cell ☐TDCJ Infirmary ☒Hospital Galveston ☒Other: [illegible] facility

Status on Discharge: ☐Improved ☐Deceased ☐Stable ☒Unstable Date: 7/15/04 Time: 2355

Mode of Transfer: ☐Van ☐Local EMS ☐UTMB EMS ☒Other: LIFE FLIGHT [illegible] UTMB

UR Notified: ☐NA ☒Yes ☐No Date: 7/15/04 Time: 2200

Pre-Certification #: 571295 UR Contact: DIANNE

Provider Signature: [signature] Date: 7/16/04 Time: [illegible]

RN/LVN Signature: [signature] LVN / [signature] LVN Date: 07/15/04 Time: 2355

Follow-up:

HSM-18 Front (9/01)

916

CORRECTIONAL MANAGED CARE
CLINIC NOTES - NURSING

Patient Name: ROBERTSON, RICKY L **TDCJ#:** 1172218 **Date:** 07/18/2004 18:55
Facility: DARRINGTON
Most recent vitals from 06/27/2004: BP: 133 / 82 (Sitting) Wt. 226 Lbs. Height Pulse: 94 (Sitting) Resp.: 18 / min
Temp: 98.2 (Oral)
Current Medications:
Current Lab Tests:
Allergies: NO KNOWN ALLERGIES
Today's Problem: LATE ENTRY FOR: 071504 2330

Name of interpreter, if required:

Plan is as follows:At approximately 2130 this night, received a call from F line that offender needed a stretcher. Pt. arrvived via stretcher to medical department unresponsive, fixed stare, eyes rolled back in head, rhythmic breathing, no response to pain/verbal stimuli, skin hot to the touch. Vital signs: T-108, BP-98/40, R-32, P-100. O2 Sat: 73%. Temp was axillary reading. Packed pt. in ice immediately, IV NaCl at a rapid drip to R post. hand using a 20 Ga. Angiocath. Blood Glucose: 283. Called Dr. Abraham who ordered pt. to be sent to nearest ER. Called TDCJ ambulance and Paramedics arrived immediately. A second IV was attempted to opposite arm but was unsuccessful. Paramedics attempted to intubate pt. Pt. was placed in Trendelenberg and blood pressure went up to 90/60.
Life Flight arrived. Second bag of NaCl hung to R IV site. Pt. breathing via ambu bag. Temp" 103.6 Rectally. Pt. was bundled up by Life Flight Team and quickly wheeled to awaiting chopper to HGER.

Electronically Signed by PRATER, MARY F L.V.N. on 07/18/2004.
Electronically Signed by OKOYE, CECILIA C.N.P. on 07/19/2004.
##And No Others##

01419

ChartRelease -- Request Worksheet
University of Texas Medical Branch at Galveston
PRINTED Fri, Jan 21, 2005 9:03 AM

PATIENT INFORMATION

MR Number & Name 708320Q Robertson, Ricky
Patient Type I expired/inpt
Discharged
Date of Birth 08/21/1966
Social Sec. Num.
Request Type 01 HCP

REQUESTOR INFORMATION

Requestor #009581
office of the inspector general
1400 Fm 655
Rosharon, TX 77583
Telephone:

ACTION
---
1. Request Processed: Yes

MATERIAL NEEDED

W Whole/Complete Recor

ACTION INFORMATION

Date Received 01/18/2005
Date Needed
Action Date 01/21/2005
Total Charges
Pages Sent
Assigned To S SUSAN
Comments:

INVOICING INFORMATION

(Not Invoiced.)

VolDD		Loc	Phys #	Loan Dt	Exp Rt Dt
VOL	01	0577		01/20/2005	01/25/2005

OFFICE OF THE INSPECTOR GENERAL
1400 FM 655
ROSHARON TX 77583

JAN-14-2005 03:57 PM OIG-ECKERT 2815953413 2263

TDCJ
REQUEST FOR PROTECTED HEALTH INFORMATION (PHI)

RECEIVED JAN 18 2005 By

To: UTMB Hospital Galveston HIM Department
Fax: (409) 772-9200

Patient Name (print): Ricky L Robertson
Patient UH # (print):
Social Security Number: [redacted] **Date of Birth:** 08-21-1966

TDCJ Division: Office of the Inspector General
US Mailing Address: 1400 FM 655
City, State, and zip code: Rosharon, Texas 77583
Phone Number & Extension: 281-595-3413 ext 2263 or 281-595-2095
Fax Number: 281-595-2558

The following medical information is being requested in accordance with the Health Insurance Portability and Accountability Act, Title 45, Subsection 164.512(k), which authorizes the disclosure of PHI to correctional institutions for:

(1) The provision of health care to such individuals;
(2) The health and safety of such individual or other inmates;
(3) The health and safety of the officers or employees of or others at the correctional institution;
(4) The health and safety of such individuals and officers or other persons responsible for the transporting of inmates or their transfer from one institution, facility, or setting to another;
(5) Law enforcement on the premises of the correctional institution; and
(6) The administration and maintenance of the safety, security, and good order of the correctional institution.

(Please provide a detailed description of the particular data and period of time you are requesting)

MEDICAL RECORDS DEPARTMENT — Entry / Flag / Copy / Send — JRRURR SG-A — Date / Initial

- [x] Emergency Records
- [x] Hospital/ Inpatient Records
- [x] Clinic/ Outpatient Records
- [x] Laboratory Reports
- [x] Pathology Reports
- [x] Radiology Reports
- [x] Consultation Reports
- [x] Pharmacology Reports
- [x] Other (specify) all records 7-15-2004 to 7-16-2004

Face/Face, Short Stay, H & P, Prog. Notes, OP, Consult, Path, Shot Record, Misc; X-Ray, Lab Report, DS Summary, Autopsy, ER, Cl. Notes, ✓ Comp. Rec, Film

JAN 21 2005

The information requested will be provided to the requesting Facility in reliance upon UTMB's "Good Faith" belief that TDCJ is requesting the PHI in accordance with the standard stated above.

Name of Requestor: Colleen Eckert, Investigator Date: 01-14-2005

Signature of Requestor: Colleen Eckert

HSA-107B (Rev. 5/03)

ADMISSION FACESHEET

CORRECTIONAL HEALTH

ROBERTSON ,RICKY 708320Q 30001068644

REGISTRATION:

ADMIT DATE: 07/16/04 03:22
LOCATION: J4A J4A 05 PATIENT FLAG: NON UT-MED
TDCJ#: 001172218

PATIENT DEMOGRAPHICS:

P O BOX 99 CITIZEN: UNKNOWN

HUNTSVILLE TX 77340 DOB: 08/21/1966 AGE: 37 MARITAL STATUS: SINGLE
WALKER 236 GENDER: MALE PATIENT SPEAKS: ENGLISH
RACE: CAUCASIAN FAMILY SPEAKS: ENGLISH

EMERGENCY CONTACT:

DIAGNOSIS:

ADMIT SYMPTOMS: HEAD

PHYSICIAN INFORMATION:

TREATING SERVICE/TEAM: MPU MICU

	ADM:	ATT:	RES:	REF:	PCP:
CODE:	06947	05464	07674	99999	99999
NAME:	ANTWI MD,STEPHEN	BEARY MD,WILLIAM M	MOVVA MBBS,SUNIL	HUNTSVILLE UNIT	HUNTSVILLE UNIT
PHONE:	409-772-6576	409-772-2436		936-295-6371	936-295-6371
FAX:	409-772-9068	409-772-9532			
SOURCE:	EMERGENCY DEPARTMENT				

PATIENT EMPLOYER INFORMATION:

GUARANTOR INFORMATION:

PATIENT RELATION TO GUARANTOR: SELF

ROBERTSON ,RICKY
P O BOX 99 x
HUNTSVILLE TX 77340

FINANCIAL/INSURANCE INFORMATION:

FINANCIAL CLASS: TDCJ

PRECERT:
INSURANCE: TDCJ STATE PRISONERS
PRIORITY/VERIFY: 1 / Y
GROUP #:
POLICY #: 001172218
SUBSCRIBER: ROBERTSON ,RICKY
PATIENT RELATION: SELF
TO SUBSCRIBER

COMMENTS:

STAT PATIENT ADMIT FROM ER @ 0322;RR

08/02/04 07:54 ***CONFIDENTIAL PATIENT INFORMATION - PLACE IN PATIENT CHART***

10.2

University of Texas Medical Branch at Galveston
Health Information Management
Data Management Division

Patient Name	Sex	Birthdate	Age	Medical Record Number	Account Number
ROBERTSON, RICKY	Male	08/21/1966	37	708320Q	30001068644

Admit Date	Discharge Date	Coder	Coding Date	LOS	Disposition
20040716 03:22 AM	20040716 03:10 PM	hcsmit	20040731 12:00	1	Died/Other

Primary Financial Class	Attending Physician	HCFA Weight	Estimated Reimbursement
TDCJ	BEARY MD,WILLIAM MILES	3.6000	27116.96

DRG Code	DRG Text
475	RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT

Prin. DX	Principal Diagnosis Text
51881	ACUTE RESPIRATORY FAILURE

DX Code	Secondary Diagnosis Text
2764	MIXED ACID-BASE BALANCE DISORDER
4589	HYPOTENSION, UNSPECIFIED
2967	BIPOLAR AFFECTIVE DISORDER, UNSPECIFIED
7806	FEVER
2768	HYPOPOTASSEMIA
2753	DISORDER OF PHOSPHORUS METABOLISM

RX Code	Procedure Text	Date	Surgeon
9671	CONTINUOUS MECHANICAL VENTILATION FOR LESS THAN 96 CONSECUTIVE	07/16/04	ANTWI MD,STEPHEN
3893	VENOUS CATHETERIZATION	07/16/04	ANTWI MD,STEPHEN
3891	ARTERIAL CATHETERIZATION	07/16/04	BEARY MD,WILLIAM MILES

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10.3